


FILED
Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90160 035 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # 713351 1. Corporation Name CENTRAL BAPTIST CHURCH OF BRANDON HOLDING CORPORATION, INC.		
Principal Place of Business 402 E. WINDHORST ROAD BRANDON FL 33510	Mailing Address 402 E. WINDHORST ROAD BRANDON FL 33510	



2. Principal Place of Business 21	2a. Mailing Address 26	3. Date incorporated or Qualified 09/20/1967
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-1746397
City & State 23	City & State 28	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
Zip 24	Country 29	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent WALKER, WILLIAM C. 959 WICKETURN BRANDON FL 33510	10. Name and Address of New Registered Agent 81 Name DAVID B. O'HARA 82 Street Address (P.O. Box Number is Not Acceptable) 910 TARAWOOD LANE 83 84 City VALRICO, FL 85 Zip Code 33594
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11. Pursuant to the provisions of Sections 617.0502 and 617.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: *[Signature]* DATE: 5/19/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LONGANECKER, CLYDE 1308 DUPONT RD BRANDON FL 33510	<input type="checkbox"/> DELETE	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MILLER, JACK E. 13702 ASPEN AVE RIVERVIEW FL 33569	<input checked="" type="checkbox"/> DELETE	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CHAMBERLAIN, DAVID 4805 STEARNS RD VALRICO FL 33594	<input type="checkbox"/> DELETE	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MILLER, JACK E. 13702 ASPEN AVE. RIVERVIEW FL	<input checked="" type="checkbox"/> DELETE	41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE	51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE	61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the officer or justice empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowerments.

SIGNATURE: *[Signature]* 4-25-99 689-6133
 SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: Clyde Longanecker PD Date Daytime Phone #

CR2E037 (1/98)