

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **714572** (5)
1. Corporation Name
UNITED AMERICAN FREE WILL BAPTIST CONFERENCE INC



Principal Place of Business: 110 W 7TH ST LAKELAND FL 33805-4813
Mailing Address: PO BOX 3827 LAKELAND FL 33802 US

3. Date Incorporated or Qualified: 05/09/1968
3a. Date of Last Report: 03/17/1995
4. FEI Number: 71-4572632
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent
**RODMON, H.J.
207 W. BELLAVISTA STREET
LAKELAND FL 33801**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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: *Henry J.C. Rodmon*
Signature, typed or printed name of registered agent and date (if applicable)

(NOTE: Registered Agent signature required when re-issuing) DATE:

12. OFFICERS AND DIRECTORS		
TITLE	PD	<input type="checkbox"/> DELETE
NAME	RODMON, H.J.	
STREET ADDRESS	207 W BELLAVISTA STREET	
CITY - ST - ZIP	LAKELAND FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	BURNS, L.H. (REV.)	
STREET ADDRESS	1029 CALIFORNIA BLVD	
CITY - ST - ZIP	SUMPTER SC	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	TILLMAN, S.	
STREET ADDRESS	2811 IDLEWISE DRIVE	
CITY - ST - ZIP	DETONA FL	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	MCFARLIN, REGINA	
STREET ADDRESS	2105 NE EDWIN STREET	
CITY - ST - ZIP	WINTER HAVEN FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	SMITH, J.W.	
STREET ADDRESS	1941 LAVON STREET	
CITY - ST - ZIP	LAKELAND FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	LAMB, LEVI	
STREET ADDRESS	2401 26TH AVENUE SOUTH	
CITY - ST - ZIP	ST PETERSBURG FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY - ST - ZIP		
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and I do not qualify for the exemption stated in Section 119.07(3)(k), 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 receiver or trustee 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.

SIGNATURE: *Henry J.C. Rodmon* HENRY J.C. Rodmon 2/2/96 (941) 687-2404
Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)