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 # 714755 (6)

1. Corporation Name

FAITH BAPTIST CHURCH, INC. OF ORLANDO, FLORIDA

Principal Place of Business	Mailing Address
500 N BUMBY AVE ORLANDO FL 32803	500 N BUMBY AVE ORLANDO FL 32803

3. Date Incorporated or Qualified: 06/11/1968
3a. Date of Last Report: 04/14/1995

2. Principal Place of Business — 21:
Suite, Apt. #, etc. — 22:
City & State — 23:
Zip — 24: Country — 25:

2a. Mailing Address — 26:
Suite, Apt. #, etc. — 27:
City & State — 28:
Zip — 29: Country — 30:

4. FEI Number: 59-6176793 ☐ Applied For ☐ Not Applicable

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

9. Name and Address of Current Registered Agent

YARBOROUGH, CECIL
500 N. BUMBY AVE
ORLANDO FL 32803

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	SD	☐ DELETE	1.1 TITLE	S/D	☒ Change ☐ Addition
NAME	HEADLEY, BILL		1.2 NAME		
STREET ADDRESS	6136 FOX HUNT TRAIL		1.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL		1.4 CITY-ST-ZIP	Orlando, FL 32808	
TITLE	AT	☒ DELETE	2.1 TITLE	AT	☐ Change ☒ Addition
NAME	EVANS, SHARON		2.2 NAME	McDaniel, Janelle	
STREET ADDRESS	235 CLEARVIEW ROAD		2.3 STREET ADDRESS	1001 California Creek Dr.	
CITY-ST-ZIP	CHULUOTA FL 32766		2.4 CITY-ST-ZIP	Oviedo, FL 32765	
TITLE	T	☒ DELETE	3.1 TITLE	T	☐ Change ☒ Addition
NAME	FOWLER, KERRY		3.2 NAME	D'Aprile II, Michael	
STREET ADDRESS	1236 HOLLY SPGS CIR		3.3 STREET ADDRESS	10506 Huntridge Rd.	
CITY-ST-ZIP	ORLANDO FL		3.4 CITY-ST-ZIP	Orlando, FL 32825	
TITLE	D	☐ DELETE	4.1 TITLE		☒ Change ☐ Addition
NAME	THORPE, CRAIG		4.2 NAME		
STREET ADDRESS	551 LILAC RD		4.3 STREET ADDRESS		
CITY-ST-ZIP	CASSELBERRY FL		4.4 CITY-ST-ZIP	Casselberry, FL 32707	
TITLE	D	☐ DELETE	5.1 TITLE		☒ Change ☐ Addition
NAME	MATHEWS, DUANE		5.2 NAME		
STREET ADDRESS	2864 CADY WAY		5.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER PARK FL		5.4 CITY-ST-ZIP	Winter Park, FL 32792	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does 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: Cecil Yarborough 3/20/96 407-339-5996
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #