

FILE NOW: FILING FEE IS \$61.25

APPROVED
AND
FILED

1997 OCT -2 PM 3: 58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NONPROFIT CORPORATION ANNUAL REPORT 1997 <i>Americlea</i>	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **715933**

1. Corporation Name

Santa Rosa Shores Baptist Church, Inc.

Principal Place of Business

Mailing Address

PO Box 40

same

3165 Highway 98

Gulf Breeze, FL 32562-7040

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

1-23-69

3a. Date of Last Report

1-25-97

4. FEI Number

000

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

Poland, Jeanette T.

82 Street Address (P.O. Box Number is Not Acceptable)

2369 Ash Lane

83

84 City

Navarre

FL

85 Zip Code

32566

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

Jeanette T. Poland

Jeanette T. Poland

9-23-97

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

SD

NAME

Willett, Glenda

STREET ADDRESS

910 Largo Dr.

CITY-ST-ZIP

Pensacola Bch, FL

TITLE

RD

NAME

Delp, Richard

STREET ADDRESS

3241 Notre Dame Dr.

CITY-ST-ZIP

Gulf Breeze, FL 32561

TITLE

TD

NAME

Murphy, Ernest E

STREET ADDRESS

3610 Ebb Tide Lane

CITY-ST-ZIP

Gulf Breeze, FL 32561

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

SD

1.2 NAME

Pittman, Paula

1.3 STREET ADDRESS

1402 El Sereno Pl

1.4 CITY-ST-ZIP

Gulf Breeze, FL 32561

2.1 TITLE

RD

2.2 NAME

Jenkins, Elton

2.3 STREET ADDRESS

1251 Airship Dr.

2.4 CITY-ST-ZIP

Gulf Breeze, FL 32561

3.1 TITLE

TD

3.2 NAME

Poland, Jeanette T.

3.3 STREET ADDRESS

2369 Ash Ln.

3.4 CITY-ST-ZIP

Navarre, FL 32566

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

☒ Addition

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14. I do 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 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:

Jeanette T. Poland

Jeanette T. Poland

9-23-97

850-939-4194

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/96)