

FILE NOW: FILING FEE IS \$61.25

FILED
Jan 22 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 729049 (7)

1. Corporation Name
COMMUNITY MISSIONARY BAPTIST CHURCH OF PENSACOLA, INC.



Principal Place of Business C/O HENRY Q. LEWIS 2610 W LEONARD ST PENSACOLA FL 32505	Mailing Address C/O HENRY Q. LEWIS 2610 W LEONARD ST PENSACOLA FL 32505
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3. Date Incorporated or Qualified
03/12/1974

4. FEI Number
59-2383724

Applied For	
Not Applicable	

2. Principal Place of Business 21 <i>Community Baptist Church</i> Suite, Apt. #, etc.	2a. Mailing Address 26 <i>Same</i> Suite, Apt. #, etc.
22 <i>2610 W. Leonard St.</i> City & State	27 City & State
23 <i>Pensacola FL</i> Zip	28 Zip
24 <i>32505</i> Country	25 <i>Escambia</i> Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

**LEWIS, HENRY Q.
 3205 SANDY LN.
 PENSACOLA FL FL 32526**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	D <input type="checkbox"/> DELETE
NAME	LANCASTER, GAREY
STREET ADDRESS	5830 AVONDALE RD
CITY - ST - ZIP	PENSACOLA FL
TITLE	D <input type="checkbox"/> DELETE
NAME	BURT, RYAN
STREET ADDRESS	119 W JORDAN ST
CITY - ST - ZIP	PENSACOLA FL
TITLE	D <input type="checkbox"/> DELETE
NAME	VIDRINE, VAN
STREET ADDRESS	651 CHILDRES ST #10
CITY - ST - ZIP	PENSACOLA FL
TITLE	P <input type="checkbox"/> DELETE
NAME	LEWIS, HENRY Q
STREET ADDRESS	3205 SANDY LANE
CITY - ST - ZIP	PENSACOLA FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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 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: *Henry Q. Lewis* **SIGNATURE REQUIRED** *1-10-98*

CR2E037 (10/97)