

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 # 743376 (6)

1. Corporation Name

THE FIRST BAPTIST CHURCH OF BRANFORD, INC.



Principal Place of Business: BRANFORD PROFESSIONAL BUILDING, PLANT AVE., BRANFORD FL 32008
Mailing Address: BRANFORD PROFESSIONAL BUILDING, PLANT AVE., BRANFORD FL 32008

3. Date Incorporated or Qualified: 06/26/1978
3a. Date of Last Report: 03/02/1995

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-sections for Suite, City & State, and Zip/Country.

4. FEI Number: 59-1203217
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

9. Name and Address of Current Registered Agent: SCOTT, JOHN L, BRANFORD PROFESSIONAL BUILDING, PLANT AVE., BRANFORD FL 32008
10. Name and Address of New Registered Agent (81-85) fields.

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: [Signature] DATE: [Date]

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD	BLALOCK, EDDIE	1.1 TITLE: PD	Carroll Hall
NAME: HENRY STREET	BRANFORD FL	1.2 NAME: 28834 79th Road	BRANFORD, FL 32008
STREET ADDRESS: RT. 1, BOX 1880	O'BRIEN FL	1.3 STREET ADDRESS: 8549 262nd Terrace	BRANFORD, FL 32008
CITY-ST-ZIP: HATCH, LEON	STATE RD 247	2.1 TITLE: TD	A.W. Gaylard
TITLE: TD	BRANFORD FL	2.2 NAME: 27090 37th Rd.	BRANFORD, FL 32008
NAME: HALL, CARROLL	ROUTE 2, BOX 1	2.3 STREET ADDRESS: PO Box 111	BRANFORD, FL 32008
STREET ADDRESS: BRANFORD FL		2.4 CITY-ST-ZIP: Odessa Moses	Rt 1, Box 25
CITY-ST-ZIP: [Empty]		3.1 TITLE: TD	BRANFORD, FL 32008
TITLE: [Empty]		3.2 NAME: Aaron Perlowich	PO Box 111
NAME: [Empty]		3.3 STREET ADDRESS: [Empty]	BRANFORD, FL 32008
STREET ADDRESS: [Empty]		3.4 CITY-ST-ZIP: [Empty]	
CITY-ST-ZIP: [Empty]		4.1 TITLE: TD	Odessa Moses
TITLE: [Empty]		4.2 NAME: [Empty]	
NAME: [Empty]		4.3 STREET ADDRESS: [Empty]	
STREET ADDRESS: [Empty]		4.4 CITY-ST-ZIP: [Empty]	
CITY-ST-ZIP: [Empty]		5.1 TITLE: TD	Odessa Moses
TITLE: [Empty]		5.2 NAME: [Empty]	
NAME: [Empty]		5.3 STREET ADDRESS: [Empty]	
STREET ADDRESS: [Empty]		5.4 CITY-ST-ZIP: [Empty]	
CITY-ST-ZIP: [Empty]		6.1 TITLE: [Empty]	
TITLE: [Empty]		6.2 NAME: [Empty]	
NAME: [Empty]		6.3 STREET ADDRESS: [Empty]	
STREET ADDRESS: [Empty]		6.4 CITY-ST-ZIP: [Empty]	
CITY-ST-ZIP: [Empty]			

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: [Signature] DATE: 3/20/96 (904) 935-1303

CR2E037 (12/95)