

**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 # **744875** (6)  
1. Corporation Name  
**THE BIBLE BAPTIST CHURCH OF BRADENTON, FLORIDA, INCORPORATED**



Principal Place of Business: **2113 MORGAN JOHNSON RD BRADENTON FL 34208**  
Mailing Address: **2113 MORGAN JOHNSON RD BRADENTON FL 34208**

3. Date Incorporated or Qualified: **11/08/1978**  
3a. Date of Last Report: **01/25/1995**

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21		26		<b>59-2119467</b>		Not Applicable	
22. Suite, Apt. #, etc.		27. Suite, Apt. #, etc.		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
23. City & State		28. City & State		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
24. Zip		29. Zip		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		<input type="checkbox"/> Yes <input type="checkbox"/> No	
25. Country		30. Country					

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
<b>BYRAM, GARY 1111 134 ST E. BRADENTON, FL. 34202</b>				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

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				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	<b>D</b>	<input type="checkbox"/> DELETE		1.1 TITLE	<b>PD</b>	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	<b>MARLOW, A.D.</b>			1.2 NAME	<b>TODD MASTERS</b>		
STREET ADDRESS	<b>3607-38TH AVENUE, E.</b>			1.3 STREET ADDRESS	<b>12304 SR 62</b>		
CITY-ST-ZIP	<b>BRADENTON FL</b>			1.4 CITY-ST-ZIP	<b>PARRISH, FL. 34219</b>		
TITLE	<b>PD</b>	<input checked="" type="checkbox"/> DELETE		2.1 TITLE	<b>VD</b>	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	<b>PENNINGTON, BILL</b>			2.2 NAME	<b>CLIFF STRONG</b>		
STREET ADDRESS	<b>5335 - 25TH ST EAST</b>			2.3 STREET ADDRESS	<b>4512 - 3 AVE. E.</b>		
CITY-ST-ZIP	<b>BRADENTON FL</b>			2.4 CITY-ST-ZIP	<b>BRADENTON, FL. 34208</b>		
TITLE	<b>VD</b>	<input checked="" type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	<b>SCHNABL, CARL</b>			3.2 NAME			
STREET ADDRESS	<b>6330-48 AVE DR. E.</b>			3.3 STREET ADDRESS			
CITY-ST-ZIP	<b>BRADENTON FL</b>			3.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE	<b>2000017376</b>	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				4.2 NAME	<b>-03/08/96--01100--027</b>		
STREET ADDRESS				4.3 STREET ADDRESS	<b>***61.25</b>		
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

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 attached sheet with an address.

SIGNATURE: *[Signature]* Date: **1-21-96** Daytime Phone #: **941.746.6221**

CR2E037 (12/95)