FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 9:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

500001472505
-05/03/95--01027--007
*****61.25 *****61.25
DO NOT WRITE IN THIS SPACE

DOCUMENT # 746791 (3)

1. Corporation Name
FORTIETH STREET BAPTIST CHURCH, INC.

Principal Place of Business	Mailing Address
6020 N 40TH STREET TAMPA FL 33610	6020 N 40TH STREET TAMPA FL 33610

3. Date Incorporated or Qualified: 04/19/1979
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-1604905 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business 21 6020 N 40th St	2a. Mailing Address 26 Tampa, FL 33610
Suite, Apt. #, etc. 22	Suite, Apt.#, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

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. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CRUMITY, RUBEN 2218 E MCBERRY AVE. TAMPA FL 33610	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 607.0502 and 607.1508, 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 607.0505, 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	PD	11 TITLE	PD ☒ Change ☐ Addition
NAME	SANCHEZ, ROBERT	12 NAME	Jacklee Gonzalez
STREET ADDRESS	8902 CHINA BERRY DR.	13 STREET ADDRESS	3811 Temple St.
CITY · ST · ZIP	TAMPA FL	14 CITY · ST · ZIP	Tampa, FL
TITLE	S	21 TITLE	☐ Change ☐ Addition
NAME	HALL, VIRGINIA K.	22 NAME	
STREET ADDRESS	1512 E IDA STREET	23 STREET ADDRESS	
CITY · ST · ZIP	TAMPA FL	24 CITY · ST · ZIP	
TITLE	TS	31 TITLE	☐ Change ☐ Addition
NAME	POWELL, JANIE	32 NAME	
STREET ADDRESS	4006 E CLIFTON AVE	33 STREET ADDRESS	
CITY · ST · ZIP	TAMPA FL	34 CITY · ST · ZIP	
TITLE	V	41 TITLE	☐ Change ☐ Addition
NAME	ADAMS, ROBERT	42 NAME	500001472505 -05/03/95--01027--008
STREET ADDRESS	6808 TAMPANIA ST.	43 STREET ADDRESS	
CITY · ST · ZIP	TAMPA FL	44 CITY · ST · ZIP	*****68.75 *****68.75
TITLE	D	51 TITLE	☐ Change ☐ Addition
NAME	CRUMITY, SHARON	52 NAME	
STREET ADDRESS	4943 HILLSBOROUGH AVE.	53 STREET ADDRESS	
CITY ST ZIP	TAMPA,FL 00000	54 CITY ST ZIP	
TITLE	D	61 TITLE	☐ Change ☐ Addition
NAME	SADLER, GEORGE	62 NAME	
STREET ADDRESS	505 E. PALM AVE	63 STREET ADDRESS	
CITY · ST ZIP	TAMPA FL	64 CITY · ST ZIP	

5/1/95 mf

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)(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: Virginia K. Hall Virginia K Hall 4/20/95
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

0083000