

FILE NOW: FILING FEE IS \$61.25

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**Mar 16 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra H. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 748701 (0)

1. Corporation Name
THE FIRST BAPTIST CHURCH OF PALMETTO, INC.



Principal Place of Business 1020 - 4TH STREET W PALMETTO FL 34221 US	Mailing Address P.O. BOX 426 PALMETTO FL 34220 US
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3. Date Incorporated or Qualified 08/29/1979	
4. FEI Number 59-0766975	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24 25	2a. Mailing Address 28 Suite, Apt. #, etc. 27 City & State 29 Zip Country 30 31
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9. Name and Address of Current Registered Agent

**HERBERT, ARTHUR L
1020 4TH STREET WEST
PALMETTO FL 34221**

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	CD	<input checked="" type="checkbox"/> DELETE
NAME	BURTON, KENNY	
STREET ADDRESS	1910 8TH ST W	
CITY-ST-ZIP	PALMETTO FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	BOYD, JIM	
STREET ADDRESS	2121 21ST. W.	
CITY-ST-ZIP	PALMETTO FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	BAKER, PHILL	
STREET ADDRESS	902 18TH AVE	
CITY-ST-ZIP	PALMETTO FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	PURVIS, PAT	
STREET ADDRESS	1913-5TH ST., W.	
CITY-ST-ZIP	PALMETTO FL 34221	
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	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	EDWARD WILLIAMS	
1.3 STREET ADDRESS	1632 Center Rd.	
1.4 CITY-ST-ZIP	TERRA CEIA, FL 34250	
2.1 TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	JIM BOYD	
2.3 STREET ADDRESS	4807 Riverview Blvd.	
2.4 CITY-ST-ZIP	Bradenton, FL 34209	
3.1 TITLE	CD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	PHILL BAKER	
3.3 STREET ADDRESS	902 16th AVE W.	
3.4 CITY-ST-ZIP	Palmetto, FL 34221	
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:  **ARTHUR HERBERT** 2/5/98 941-722-7795

CR2E037 (10/97)