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Mar 11 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 753847 (3)

1. Corporation Name
DUNNS CREEK BAPTIST CHURCH, INC.



Principal Place of Business Mailing Address
1425 STARRATT ROAD JACKSONVILLE FL 32218
1425 STARRATT ROAD JACKSONVILLE FL 32218-1445

3. Date Incorporated or Qualified 08/20/1980
3a. Date of Last Report 03/17/1996

2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-1367512 Applied For Not Applicable
22 Suite, Apt. #, etc. 27 Suite, Apt. #, etc. 5. Certificate of Status Desired \$8.75 Additional Fee Required
23 City & State 28 City & State 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
24 Zip Country 29 Zip Country 30 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
WILKINSON, HERSHELL
2106 NEW BERLIN RD.
JACKSONVILLE FL 32218
10. Name and Address of New Registered Agent
81 Name Newman, Robert S
82 Street Address (P.O. Box Number is Not Acceptable) 15430 Cape Dr. N
83
84 City Jacksonville FL 85 Zip Code 32226

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: 3/12/97
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS
TITLE PD DELETED
NAME WILKINSON, HERSHELL
STREET ADDRESS 2106 NEW BERLIN RD. Deceased
CITY-ST-ZIP JACKSONVILLE FL
TITLE SD DELETED
NAME OWENS, JOYCE
STREET ADDRESS 3101 STARRATT RD
CITY-ST-ZIP JACKSONVILLE FL
TITLE T DELETED
NAME BAEZ, HERB
STREET ADDRESS 17028 EAGLE BEND BLVD
CITY-ST-ZIP JACKSONVILLE FL 32226
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE P/D
1.2 NAME NEWMAN, Robert S.
1.3 STREET ADDRESS 15430 CAPE DR. N.
1.4 CITY-ST-ZIP JACKSONVILLE, FLA. 32226
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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: [Signature] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date Daytime Phone #0006813

CP2E037 (9/96)