FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT # 75

754431

(5)

FIRST BAPTIST CHURCH MARKHAM WOODS, INC.

	DAFTIOT CHUNCH MANN	HAM WOODS, INC.				
Principal Place of Business		Mailing Address	Mailing Address		i in meier im biet it finger genfan beefter	DIST. STOLL GIGIT STRIL BESTE WISTE STRIL STRIL SOS
5400 MARKHAM WOODS ROAD LAKE MARY FL 32746-4012		5400 MARKHAM WOODS I LAKE MARY FL 32746-401				
					3. Date Incorporated or Qualified 10/01/1980	3a. Date of Last Report 04/25/1996
2. Principal Place of Business		2a. Mailing Address	⊢ *		4. FEI Number 59-2045956	Applied For Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
Z ip	Country	28 Z _{ID}	Countr		Trust Fund Contribution	Added to Fees
24	25	29	30	у	This corporation has liability for Florida Statutes	intangible tax under s. 199.032, ☐ Yes ☐ No
	9. Name and Address of Cur		1901		10. Name and Address of New Re	
			81	Name		
-SUFFE-1	2MT09H-POINT 04-	address change	only 83	Street Ad 225	dress (P.O. Box Number is Not Acceptat E. Palmetto Avenue	(eic
-SANFORD-FL 82778-			84	City L	ongwood	FL 85 Zip Code 32750
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statem office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hagent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.						
office or r	egistered agent, or both, in the Sta im familiar with, and accept the ob-	ate of Florida. Such change was a ligations of, Section 617,0503. Flo	authorized b orida Statute	y the corpor	ation's board of directors. I hereby accep	ot the appointment as registered
SIGNATURE		inguitation of cooling the local, i.e.	Jinaa Olaloto			
SIGNATORE	Signature, typed or printed name of registered	agent and title if applicable. (NOT	E: Registered Ag	ent signature req	guired when reinstating)	DATE
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	
TITLE	VD	☐ DELETE	1.1 TITLE			Change Addition
NAME	CHAMBERS, JOE SR.		1.2 NAME			
STREET ADDRESS	==+ ···································		1.3 STREET	T ADDRESS		
CITY - S1 - ZIP	LAKE MARY FL 32746		1.4 CITY-1	ST-ZIP	····	
TITLE	P	☐ DELETE	2.1 TITLE			Change Addition
NAME	DIEMER, JACK	• 44.	2.2 NAME			
STREET ADDRESS	5 860 MCINTOSH PT. SU ITI	: 104	2.3 STREET ADDRESS		225 E. Palmatto Av	enue
CITY-ST-ZIP	SANFORD FL-32773	7 20.00	2. 4 CITY-	ST-ZIP	Longwood, FL 32750	
THILE	SD CLOPIA	☐ DELETE	3.1 TITLE	1		Change Addition
NAME	PARKER, GLORIA		3.2 NAME			ļ
STREET ADDRESS	1701 FOUNTAINHEAD DR.		3.3 STREET	ADDRESS		l l
CITY - ST - ZIP	LAKE MARY FL 32746	T priett	3.4. CITY-	ST-ZIP		
TITLE	TD DALIE	☐ DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME	KING, PAUL		4. 2 NAME			
STREET ADORESS	1720 IVERNESS COURT			ADDRESS		
CITY - ST - ZIP	LONGWOOD FL	T noistr	4.4 CITY-5	ST-ZIP		T 66 17 17.00
TIFLE			5.1 TITLE	1		Change Addition
NAME	BROWN, SANFORD		5.2 NAME			
STREET ADDRESS	908 S MYRTLE AVE		5.3 STREET			
CITY-ST-ZIP	SANFORD FL	☐ DELETE	5.4 CITY - \$	ST-ZIP		Chartes Address
TITLE		ווון טבננונ	6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		

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

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/97 (407) 333-208

FILED

Apr 22 1997 8:00am

Secretary of State