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FILED
Feb 04 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **756640** (9)

1. Corporation Name

FLAMINGO ROAD BAPTIST CHURCH, INC.

Principal Place of Business

Mailing Address

**12401 STIRLING ROAD
FT LAUDERDALE FL 33330**

**12401 STIRLING ROAD
FT. LAUDERDALE FL 33330-3211
US**



3. Date Incorporated or Qualified **03/06/1981** 3a. Date of Last Report **07/29/1996**

2. Principal Place of Business		2a. Mailing Address		4. FEI Number 59-1953931		Applied For ☐ Not Applicable	
21 Suite, Apt #, etc.		26 Suite, Apt #, etc.		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
22 City & State		27 City & State		6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
23 Zip	Country	28 Zip	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No			
24	25	29	30				

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**JOHNSON, JAY
8941 SW 57 ST
COOPER CITY FL 33328**

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code FL

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	JOHNSON, JAY	1.2 NAME	
STREET ADDRESS	8941 SW 57 ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	COOPER CITY FL 33328	1.4 CITY-ST-ZIP	
TITLE	VCD ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	WENGERT, GERRY	2.2 NAME	
STREET ADDRESS	11091 MINNEAPOLIS DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	COOPER CITY FL 33026	2.4 CITY-ST-ZIP	
TITLE	SD ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	SAWYER, DAN	3.2 NAME	
STREET ADDRESS	1368 N. UNIVERSITY	3.3 STREET ADDRESS	
CITY-ST-ZIP	PLANTATION FL 33322	3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ 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 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: *Sandra B. Mortham* **REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # **954-434-1500**

CR2E037 (9/96)