

# FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # 758930 (2)

1. Corporation Name

FORT WHITE BAPTIST CHURCH, INC.



Principal Place of Business

Mailing Address

~~WILSON WARDEN BOOSMARK~~  
P.O. BOX 187  
FORT WHITE FL 32038

~~WILSON WARDEN BOOSMARK~~  
P.O. BOX 187  
FORT WHITE FL 32038

3. Date Incorporated or Qualified  
06/26/1981

3a. Date of Last Report  
01/26/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-2890901

Applied For

Not Applicable

22

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

23

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

24

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

~~HOLLINGSWORTH, RERRY, CARLTON X~~  
~~STATE ROAD 47 NORTH OF US 27 X~~  
~~FORT WHITE FL 32038 X~~

81 Name

Wilbur Edwards

82 Street Address (P.O. Box Number is Not Acceptable)

Corner of N. Bryant & E. Wales Sts.

83

84 City

Ft. White

FL

85 Zip Code

32038

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 Wilbur Edwards

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

(NOTE: Registered Agent signature required when filing statement)

DATE

3-8-96

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
PD	<del>BARRAS, JAMES F. JR.</del>	<del>STATE ROAD 47 NORTH OF US 27</del>	<del>FORT WHITE FL</del>	<input checked="" type="checkbox"/>
D / Tr	HILLHOUSE, MARTIN	US 27 N. JUNCTION RD.	FORT WHITE FL	<input type="checkbox"/>
T / D	DIX, RUTH	CR 778 OFF US 27S	FT WHITE FL	<input type="checkbox"/>
D	<del>TERRY, ORA</del>	<del>6-BRYANT, ST OFF US 27</del>	<del>FT WHITE FL</del>	<input checked="" type="checkbox"/>
RT	<del>HOLLINGSWORTH, CARLTON</del>	<del>ST ROAD 47 S. OF US 27</del>	<del>HIGH SPRINGS FL</del>	<input checked="" type="checkbox"/>
D / Tr	<del>DIX, WILLIAM</del>	<del>CR 778 OFF US 27 S</del>	<del>FT WHITE FL</del>	<input checked="" type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
PD Tr	President, Director, Tr.	William G. Dix	CR Road 778 off US#27S	
		Ft. White, Fl.	32038	<input type="checkbox"/> Change <input type="checkbox"/> Addition
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
Director/Trustee	Edward Floyd	Cor. of CR 18 & Memorial Drive	Ft. White, Fl.	
			32038	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
Secretary/Director	Lorine Edwards	Cor. N. Bryant & E. Wales Sts.	Ft. White, Fl.	
			32038	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
Director/Trustee	Janice Fowler	N. Bryant St.	Ft. White, Fl.	
			32038	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
Director/Trustee /R	Wilbur Edwards	Cor. of N. Bryant & E. Wales Sts.	Ft. White, Fl.	
			32038	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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)(k), 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:

A. Ruth Dix (Mrs.)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

454-4091

Daytime Phone #

CR2E037 (12/95)