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Mar 26 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 760847 (4)

1. Corporation Name

FIRST BAPTIST CHURCH OF JACKSONVILLE, FLORIDA IN C.



Principal Place of Business

Mailing Address

24 WEST ASHLEY STREET JACKSONVILLE FL 32202

124 WEST ASHLEY STREET JACKSONVILLE FL 32202-3104

3. Date Incorporated or Qualified 11/30/1981

3a. Date of Last Report 03/06/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number 59-0823939

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

25 Country

28 Zip

30 Country

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

DAVIS, MARSHALL SUITE 620, 233 E. BAY STREET JACKSONVILLE FL 32202

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

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 VD [] DELETE
NAME SOUD, A. C.
STREET ADDRESS 3738 RIVER HALL DRIVE
CITY - ST - ZIP JACKSONVILLE, FL 00000

1.1 TITLE [] Change [] Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE PD [] DELETE
NAME SWAIN, WILLIAM R
STREET ADDRESS 3713 TIMUCUA TRAIL
CITY - ST - ZIP JACKSONVILLE, FL 00000

2.1 TITLE [] Change [] Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE SD [] DELETE
NAME DAVIS, MARSHALL D
STREET ADDRESS 4130 MCGIRTS BLVD.
CITY - ST - ZIP JACKSONVILLE FL

3.1 TITLE [] Change [] Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE TD [] DELETE
NAME WHORTON, JUDSON S
STREET ADDRESS 5443 JOHN REYNOLDS DRIVE
CITY - ST - ZIP JACKSONVILLE, FL 00000

4.1 TITLE [] Change [] Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE SD [] DELETE
NAME STURGILL, NELSON
STREET ADDRESS 13746 BROMLEY POINTE DR
CITY - ST - ZIP JACKSONVILLE, FL 00000

5.1 TITLE [] Change [] Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE TD [] DELETE
NAME BLOUNT, JOHN O.
STREET ADDRESS 6264 RIVIERA LANE
CITY - ST - ZIP JACKSONVILLE, FL 00000

6.1 TITLE [] Change [] Addition
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:

John O. Blount
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John O. Blount

3/19/97

(904) 366-1221

Date

Daytime Phone

CR2E037 (9/96)