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May 09 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 # 762809 (2)

1. Corporation Name
PLEASANT RIDGE BAPTIST CHURCH, INC.



Principal Place of Business 1015 PLEASANT ROAD DEFUNIAK SPRINGS FL 32433 US		Mailing Address 1015 PLEASANT RIDGE ROAD DEFUNIAK SPRINGS FL 32433-8528 US		3. Date Incorporated or Qualified 04/09/1982	3a. Date of Last Report 03/26/1996
2. Principal Place of Business 21	2a. Mailing Address 26	4. FEI Number 59-2338553		Applied For Not Applicable	
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required			
City & State 23	City & State 28	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees			
Zip 24	Country 25	Zip 29	Country 30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent MALONE, JACKIE T. 436 THORNTON ROAD DEFUNIAK SPRINGS FL 32433		10. Name and Address of New Registered Agent 81 Name Gainey, Ronnie 82 Street Address (P.O. Box Number is Not Acceptable) 178 JW Gainey Loop 83 84 City DeFuniak Springs FL 85 Zip Code 32433	
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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 *Ronnie Gainey* (NOTE: Registered Agent signature required when reinstating) DATE **4/23/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TR <input checked="" type="checkbox"/> DELETE	1.1 TITLE	TRVP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	COSSON, WILLIAM H.	1.2 NAME	Cosson, Jim A
STREET ADDRESS	2884 CO HWY 280 W	1.3 STREET ADDRESS	1855 Cosson Rd
CITY-ST-ZIP	DEFUNIAK SPRINGS FL	1.4 CITY-ST-ZIP	DeFuniak Springs, FL 32433
TITLE	TRS <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COSSON, FAYE Y.	2.2 NAME	
STREET ADDRESS	891 COY ELLIS ROAD	2.3 STREET ADDRESS	
CITY-ST-ZIP	DEFUNIAK SPRINGS FL	2.4 CITY-ST-ZIP	
TITLE	TRP <input checked="" type="checkbox"/> DELETE	3.1 TITLE	TR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MALONE, JACKIE T.	3.2 NAME	Mitchem, James E. "Pete"
STREET ADDRESS	436 THORNTON ROAD	3.3 STREET ADDRESS	2644 Bob Sikes Rd
CITY-ST-ZIP	DEFUNIAK SPRINGS FL	3.4 CITY-ST-ZIP	DeFuniak Springs FL 32433
TITLE	TRT <input checked="" type="checkbox"/> DELETE	4.1 TITLE	TRT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WHITEHEAD, DEWIE	4.2 NAME	LaMonte, Dennis O
STREET ADDRESS	1123 CHESSER ROAD	4.3 STREET ADDRESS	256 Bay Avenue
CITY-ST-ZIP	DEFUNIAK SPRINGS FL	4.4 CITY-ST-ZIP	DeFuniak Springs, FL 32433
TITLE	TR <input type="checkbox"/> DELETE	5.1 TITLE	TRP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GAINEY, RONNIE	5.2 NAME	
STREET ADDRESS	P O BOX 792 N/A	5.3 STREET ADDRESS	
CITY-ST-ZIP	DEFUNIAK SPRINGS FL	5.4 CITY-ST-ZIP	
TITLE	TRVP <input type="checkbox"/> DELETE	6.1 TITLE	TR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NELSON, LONNIE	6.2 NAME	
STREET ADDRESS	307 MITCHEM ROAD	6.3 STREET ADDRESS	
CITY-ST-ZIP	DEFUNIAK SPGS. FL	6.4 CITY-ST-ZIP	

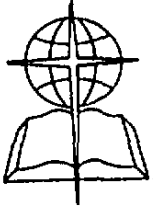
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall 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 *James H. Cosson* DATE **April 23 1997**

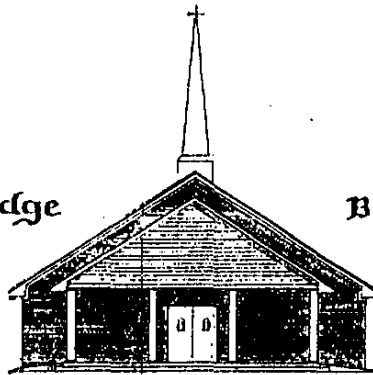
CR2E037 (9/96)

Pleasant Ridge

Baptist Church



1015 Pleasant Ridge Road
DeFuniak Springs
Florida 32433



J.C. McLendon, Interim Pastor
Church Phone: 892-3500
Home Phone: 892-5840

Phil. 1:18 Proclaiming Christ and God's Word to our world.

NONPROFIT CORPORATION ANNUAL REPORT 1997

Officers and Directors continued...

TR
Nelson, Henry L
284 Vann Road
DeFuniak Springs, FL 32433