FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



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

1996 DOCUMENT # C10458

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| EODECT | DADV | DADTICT | CHURCH. | INIC |
|--------|------|---------|---------|------|
| FURENT | PAHK | BAPHOL | CHUKCH. | INU. |

| FOREST PARK BAPTIST CHURCH, INC. | | | | | | | | | |
|----------------------------------|---|--|--------------------------|------------------|---|-----------------------------------|----------------------------|--|--|
| Principal Place | of Business | Mailing Address | | | | :UIL UIDIL BIBIK UIDIL BIUJI | Oldia Bibli (90) | | |
| 941 18TH STR VERO BEACH | | 941 18TH STREET VERO BEACH FL 32960 | | | | | | | |
| | | | | | 3. Date Incorporated or Qualified 09/12/1955 | 3a. Date of Last 04/18/19 | | | |
| 2. Principal Pla | ce of Business | 2a. Mailing Address | | | 4. FEI Number NOT APPLICABLE | +- | Applied For | | |
| Suite, Apt. # | t. etc. | Suite, Apt. #, etc. | | | | \$8.75 | Not Applicable Additional | | |
| 22 | | 27 | | | Certificate of Status Desired | 1 4 | Required | | |
| City & State City & State 28 | | City & State | 3 | | Election Campaign Financing Trust Fund Contribution | S5.00 May Be Added to Fees | | | |
| Zip | Country | Zip | Country | | This corporation has liability for in | ntangible tax under s. Yes DNo | . 199.032, | | |
| 24 | 25 9. Name and Address of Curren | 29 30 | 0 | | Fiorida Statutes L. 10. Name and Address of New Re | | | | |
| | 3. Hullo alla Padioco el Caller | | 81 | Name | | | | | |
| | KENNETH GAIL | | 82 | Street A | ddress (P.O. Box Number Is Not Acceptable | э) | | | |
| 941 18TH | 1 ST. ACH FL 32960 | | 83 | | | | | | |
| | • | | 84 | - " | | FLI | p Code | | |
| 11. Pursuant te | o the provisions of Sections 617.0502 | and 617.1508, Florida Statutes, t | the above- | named cor | poration submits this statement for the purp | ose of changing its r | registered office | | |
| or registere familiar wit | ed agent, or both, in the State of Floric h, and accept the obligations of Secti | la. Soch change was authorizedit on 617.0503, Florida Statutes. | by the corp | oration's b | poration submits this statement for the purpoard of directors. I hereby accept the appoint | intment as registered | lagent. Lam | | |
| SIGNATURE | - 11 mondal | / V. S./ (. // | Kenn | eth G | ail Jones 6 | 128/96 | <u></u> | | |
| | Signature typed or printed name of registered agent | portuile Manufacable (NOTE: F | | nt signature rec | quired when reinstating) | DATE CEDE AND DIRECTO | 7DC IN 12 | | |
| 12. | OFFICERS AND | DIRECTORS DIRECTORS | 13. 1.1 TITLE | ··· | ADDITIONS/CHANGES TO ØFFIC | CERS AND DIRECTO | Addition | | |
| NAME | PD Pedrazzoli, James | DECER | 1.2 NAME | | | PI | | | |
| STREET ADDRESS | 225-17TH AVE. | | | ADORESS | | | Į | | |
| CITY-ST-ZIP | VERO BEACH FL 33962 | | 1.4 CITY-5 | | | 32962 | İ | | |
| TITLE | DV | DELETE | 2.1 TITLE | | | Change | Addition | | |
| NAME | CHAMBLEY, BILLY | | 2.2 NAME | | | | | | |
| STREET ADDRESS | 2135-34TH AVE. | | 2.3 STREE | T ADDRESS | | | | | |
| CITY-ST-ZIP | VERO BEACH FL 32960 | DELETE | 2. 4 CITY - | ST-ZIP | | Change | Addition | | |
| TITLE | S CHANDLEY OLADVO | □ nere se | 3.1 TITLE 3.2 NAME | | | e onange | | | |
| NAME STREET ADDRESS | CHAMBLEY, GLADYS 2135 -34TH ST. | | | LADDRESS | 2135-34 4 Ave. | | | | |
| CITY-S1-ZIP | VERO BCH FL 33960 | | 3.4. CiTY- | SI (P) | 2135-344 Ave. 32960 | | | | |
| TITLE | Τ | DELETE | 4.1 TITLE | | | Change | Addition | | |
| NAME | MAWHINNEY, WILLIAM G. | | 4. 2 NAME | | | | | | |
| STREET ADDRESS | 3423 ELVIRA WAY | | 4.3 STREE | T ADDRESS | | | | | |
| C!TY-ST-ZIP | VERO BEACH FL 32960 | | 44 CITY- | ST-ZIP | | | - Addition | | |
| TITLE | | DELETE | 51 TITLE | | | Change | ☐ Addition | | |
| NAME | | | 52 NAME | | | | 1 | | |
| STREET ADDRESS CHTY-ST-ZIP | | | 5.4 CITY- | T ADDRESS | | | | | |
| TITLE | | DELETE | 6.1 TITLE | 31-21 | | ☐ Change | Addition | | |
| NAME | | - - | 6.2 NAME | | | - | | | |
| STREET ADDRESS | | | 6.3 STREE | T ADDRESS | | | | | |
| CITY-ST-ZIP | | | 6.4 CITY- | | | | | | |
| certify that oath; that | the information indicated on this annu | ual report or supplemental annual pration or the receiver or trustee er | report is tr mpowered | ue and acc | ify for the exemption stated in Section 119.6 curate and that my signature shall have the in a this report as required by Chapter 617, Fig. | same legal effect as r | rr made under 🔝 | | |
| CICNIAT | URF. Jamison | V. | | | 2/24/04 | 407-562-5 | 601 | | |
| SIGNAT | SIGNATURE AND TYPED OF | PRINTED NAME OF SIGNING OFFICER O | A DIRECTOR | | 2/26/56 Dete | Daytime Phone | | | |