

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandia B. Mortnam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
55 FEB -5 PM 12:17

DOCUMENT # **N00288** (3)
1. Corporation Name
THE SOUTH BABCOCK STREET BAPTIST CHURCH, INC.

Principal Place of Business Mailing Address
**7415 BABCOCK STREET S.E.
PALM BAY FL 32909** **7415 BABCOCK STREET S.E.
PALM BAY FL 32909**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **12/12/1983** 3a. Date of Last Report **02/11/1994**
4. FEI Number **59-2355906** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$68.75 Supplemental Fee Not Required**
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent
**LOURY, DENNIS
1364 HAZEL ST. NW
PALM BAY FL 32907**

10. Name and Address of New Registered Agent
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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when renewing) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	LOURY, DENNIS
STREET ADDRESS	1364 HAZEL ST NW
CITY-ST-ZIP	PALM BAY FL
TITLE	DV
NAME	FRAZIER, ROBERT R
STREET ADDRESS	7425 BABCOCK ST.,S.E.
CITY-ST-ZIP	PALM BAY FL
TITLE	D6
NAME	ROBERTS, BOBBY
STREET ADDRESS	1786 SAND RD. SE
CITY-ST-ZIP	PALM BAY FL 32909
TITLE	DT
NAME	SIMON, RICHARD
STREET ADDRESS	663 CROTON RD
CITY-ST-ZIP	MELBOURNE FL
TITLE	D
NAME	CHANCEY, HUGH
STREET ADDRESS	1122 W SABAL PALM LN
CITY-ST-ZIP	BAREFOOT BAY FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	05
3.3 STREET ADDRESS	Gone Lorry
3.4 CITY-ST-ZIP	573 Parker Rd
	Melbourne FL 32901
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 is voluntarily furnished and does not qualify for the exemption stated in Section 118.07(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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Dennis Lorry Dennis Lorry 1-31-95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Title Date (Daytime Phone #)