

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 # N16092 (1)

1. Corporation Name

GULF BEACH PRESBYTERIAN CHURCH OF PANAMA CITY BEACH, INC.



Principal Place of Business	Mailing Address
FULT BEACH PRESBYTERIAN CHURCH 271 S. HIGHWAY 79 PANAMA CITY FL 32413 US	GULF BEACH PRESBYTERIAN CHURCH 271 S HIGHWAY 79 PANAMA CITY FL 32413 US

3. Date Incorporated or Qualified 07/29/1986	3a. Date of Last Report 01/31/1995
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2. Principal Place of Business	2a. Mailing Address	4. FEI Number 59-2383759	Applied For Not Applicable
21	26	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
Suite, Apt. #, etc.	Suite, Apt. #, etc.	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
22	27	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
City & State	City & State		
23	28		
Zip	Country		
24	25		
	29		
	30		

9. Name and Address of Current Registered Agent

GILMORE, DOGU
100 VILLA COURT
SUITE 1
PANAMA CITY BEACH FL 32413

10. Name and Address of New Registered Agent

81 Name ART HOPKINS	85 Zip Code 32408
82 Street Address (P.O. Box Number is Not Acceptable) 121 ROSE CORAL DR	
83	
84 City PANAMA CITY BEACH FL	

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

Arthur S. Hopkins

1/18/96

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	PT	<input type="checkbox"/> DELETE
NAME	HOPKINS, ART	
STREET ADDRESS	121 RISE CORAL DRIVE	
CITY-ST-ZIP	PANAMA CITY FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	UZZELL, THOMAS	
STREET ADDRESS	17135 FRONT BEACH ROAD	
CITY-ST-ZIP	PANAMA CITY BEACH FL	
TITLE	VPS	<input checked="" type="checkbox"/> DELETE
NAME	WELCH, THOMAS H	
STREET ADDRESS	619 MALAGA PL	
CITY-ST-ZIP	PANAMA CITY BCH FL	
TITLE	PT	<input checked="" type="checkbox"/> DELETE
NAME	GILMORE, DOUG	
STREET ADDRESS	100 VILLA COURT	
CITY-ST-ZIP	PANAMA CITY BCH FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	SEGREST, RUTH	
STREET ADDRESS	19456 ALFA VISTA ROAD	
CITY-ST-ZIP	PANAMA CITY BEACH FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	DERICK, RUSSELL	
STREET ADDRESS	120 HEATHER DR	
CITY-ST-ZIP	PANAMA CITY BCH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	BOB DAVISON	
1.3 STREET ADDRESS	601 West Gulf Blvd.	
1.4 CITY-ST-ZIP	Panama City Bch, FL 32413	
2.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Lou Novak	
2.3 STREET ADDRESS	147 Grand Heron Dr.	
2.4 CITY-ST-ZIP	Panama City Bch, FL 32407	
3.1 TITLE	VPS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Bill Miner	
3.3 STREET ADDRESS	112 Palm Circle	
3.4 CITY-ST-ZIP	Panama City Bch, FL	
4.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Chuck Craver	
4.3 STREET ADDRESS	101 Sun Lane	
4.4 CITY-ST-ZIP	Panama City Bch, FL	
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 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:

Arthur S. Hopkins

1/18/96

904-234-3161

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)