

**FILE NOW: FILING FEE IS \$61.25**

**FILED**

**Mar 31 1998 8:00am  
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N16875 (9)**  
1. Corporation Name  
**FIRST BAPTIST CHURCH OF DELRAY BEACH, FLORIDA**

Principal Place of Business <b>16333 SO. MILITARY TRAIL DELRAY BEACH FL 33484-6628</b>	Mailing Address <b>16333 SO. MILITARY TRAIL DELRAY BEACH FL 33484-6628</b>
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<b>21</b> 2. Principal Place of Business	<b>2a.</b> Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
<b>22</b> City & State	<b>27</b> City & State
<b>23</b> Zip	<b>28</b> Country
<b>24</b> Country	<b>29</b> Zip
<b>25</b> Country	<b>30</b> Zip

<b>3.</b> Date Incorporated or Qualified <b>09/19/1986</b>	
<b>4.</b> FEI Number <b>59-0760201</b>	Applied For <input type="checkbox"/> Not Applicable
<b>5.</b> Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>6.</b> Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
<b>7.</b> Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>8.</b> This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

**9. Name and Address of Current Registered Agent**

**ECKEL, MARK  
640 NW 10 CT  
BOYNTON BCH FL 33428**

**10. Name and Address of New Registered Agent**

<b>81</b> Name <b>John Zylis</b>	
<b>82</b> Street Address (P.O. Box Number is Not Acceptable) <b>1386 Auburn Court</b>	
<b>83</b> City & State <b>Lantana, FL 33462</b>	
<b>84</b> City <b>Lantana</b>	<b>85</b> Zip Code <b>FL 33462</b>

**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 *John P. Zylis* **3.25.98**  
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 <b>CD</b>	<input type="checkbox"/> DELETE	1.1 TITLE <b>CD</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>ECKEL, MARK</b>		1.2 NAME <b>John Zylis</b>	
STREET ADDRESS <b>640 NW 10 AVE</b>		1.3 STREET ADDRESS <b>1386 Auburn Court</b>	
CITY-ST-ZIP <b>BOYNTON BCH FL</b>		1.4 CITY-ST-ZIP <b>Lantana, FL 33462</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE <b>VD</b>	<input type="checkbox"/> DELETE	2.1 TITLE <b>VD</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>MCDUGALD, JEFF</b>		2.2 NAME <b>Charles E. Leech</b>	
STREET ADDRESS <b>6094 LINTON BLVD</b>		2.3 STREET ADDRESS <b>12635 Barwick Road</b>	
CITY-ST-ZIP <b>DELRAY BEACH FL</b>		2.4 CITY-ST-ZIP <b>Boynton Beach, FL 33436</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE <b>SD</b>	<input type="checkbox"/> DELETE	3.1 TITLE <b>SC</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>GWYNN, CHARLES B</b>		3.2 NAME <b>Paul Myrick</b>	
STREET ADDRESS <b>615 LAKE DR</b>		3.3 STREET ADDRESS <b>1005 S. E. 4th Street</b>	
CITY-ST-ZIP <b>DELRAY BCH FL</b>		3.4 CITY-ST-ZIP <b>Boynton Beach, FL 33435</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE <b>D</b>	<input type="checkbox"/> DELETE	4.1 TITLE <b>D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>PIGNATO, JAMES V.</b>		4.2 NAME <b>William Gwynn</b>	
STREET ADDRESS <b>25C STRATFORD DR</b>		4.3 STREET ADDRESS <b>216 N. Seacrest Circle</b>	
CITY-ST-ZIP <b>BOYNTON BCH FL</b>		4.4 CITY-ST-ZIP <b>Delray Beach, FL 33444</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE <b>D</b>	<input type="checkbox"/> DELETE	5.1 TITLE <b>D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>FRIEDLEY, DAVID G.</b>		5.2 NAME <b>Douglas Tirpak</b>	
STREET ADDRESS <b>4063 BRANDON DR</b>		5.3 STREET ADDRESS <b>5302 VanBuren Road</b>	
CITY-ST-ZIP <b>DELRAY BEACH FL</b>		5.4 CITY-ST-ZIP <b>Delray Beach, FL 33484</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE <b>D</b>	<input type="checkbox"/> DELETE	6.1 TITLE <b>D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>MOORE, JOE</b>		6.2 NAME <b>Tom Springer</b>	
STREET ADDRESS <b>6850 NW 2 AVE #6</b>		6.3 STREET ADDRESS <b>4681 Brandywine Drive</b>	
CITY-ST-ZIP <b>BOCA RATON FL</b>		6.4 CITY-ST-ZIP <b>Boca Raton, FL 33487</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

**14.** I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *[Signature]* SECRETARY OF STATE 3.25.98 571-145-5000

CR2E037 (10/97)