

FILE NOW: FILING FEE IS \$61.25

FILED

May 14 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # N21764 (8)  
1. Corporation Name  
FIRST BAPTIST CHURCH OF SANTA ROSA BEACH, INC.



Principal Place of Business: HIGHWAY C393 SOUTH - PO BOX 1193, SANTA ROSA BEACH FL 32459  
Mailing Address: HIGHWAY C393 SOUTH - PO BOX 1193, SANTA ROSA BEACH FL 32459

3. Date Incorporated or Qualified: 07/01/1987  
4. FEI Number: 59-1564092

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-headers for Suite, City & State, Zip, and Country.

5. Certificate of Status Desired: \$8.75 Additional Fee Required  
6. Election Campaign Financing: \$5.00 May Be Added to Fees  
7. Is this nonprofit corporation a homeowners association?  
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

9. Name and Address of Current Registered Agent: HULL, PATRICIA A, HIGHWAY C393 SOUTH, PO BOX 1193, SANTA ROSA BEACH FL 32459

10. Name and Address of New Registered Agent: Jewell Bailey, Hwy C393 South, P.O. Box 1193, Santa Rosa Beach, FL 32459

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: Jewell Bailey, Church Clerk, Date: Apr 29, 1998

12. OFFICERS AND DIRECTORS

TITLE	CT	<input type="checkbox"/> DELETE
NAME	HULL, ED	
STREET ADDRESS	67 GULF POINT ROAD	
CITY-ST-ZIP	SANTA ROSE BEACH FL 32459	
TITLE	T	<input type="checkbox"/> DELETE
NAME	HARRIS, RON	
STREET ADDRESS	100 SPOOKEY LANE #5B	
CITY-ST-ZIP	SANTA ROSE BCH FL 32459	
TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	KEMP, DANHY	
STREET ADDRESS	P.O. BOX 1330 N/A	
CITY-ST-ZIP	SANTA ROSA BCH FL 32459	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
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 checked="" type="checkbox"/> Addition
3.2 NAME	Lynette Dungan
3.3 STREET ADDRESS	41 Bramble St.
3.4 CITY-ST-ZIP	Santa Rosa Beach, FL 32459
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 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: Jewell Bailey, Date: Apr 29 1998

CR2E037 (1097)