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

**NONPROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

#### Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N34810 (4)

## BLACK POND BAPTIST CHURCH, INC.

|   |   |                          |                                 | <u> </u>   |   |
|---|---|--------------------------|---------------------------------|--|---|
| Principal Place of Business   | Mailing Address   |                          |                                 | ######################################   | BBit Bifff Bibit Albit Afbit bigit dibit inbi                       |
| 3644 OLD JENNINGS RD<br>MIDDLEBURG FL 32068<br>US   | 3644 OLD JENNINGS RD<br>MIDDLEBURG FL 32068-37<br>US      | 34                       |                                 |  |   |
|   |   |                          |                                 | <ol> <li>Date Incorporated or Qualified<br/>10/19/1989</li> </ol>  | 3a. Date of Last Report<br>06/25/1996                               |
| 2. Principal Place of Business  | 2a. Mailing Address<br>26                                 |                          |                                 | 4. FEI Number<br>59-1903774  | Applied For<br>Not Applicable                                       |
| Suite, Apt. #, etc  | Suite, Apt. #, etc.                                       |                          |                                 | 5. Certificate of Status Desired   | \$8.75 Additional   |
| 22  | 27 City 9 City  |                          |                                 |  | Fee Hequired  |
| City & State  | City & State  |                          |                                 | 6. Election Campaign Financing Trust Fund Contribution   | \$5.00 May Be Added to Fees   |
| Zip Country   | Zip   | Cou                      | ntry                            | 8. This corporation has liability for  |   |
| 24 25   | 29  | 30                       |                                 | Florida Statutes 🔲 Yes 💢 No  |   |
| 9. Name and Address of Current  | t Registered Agent  |                          |                                 | 10. Name and Address of New R  | egistered Agent   |
| HALL, RUSSELLL  |   |                          | 81 Name<br>82 Street Ac         | SILCOX, E. W. Idress (P.O. Box Number is Not Accepte   | ble)  |
| 5355 HWY 17 SOUTH<br>GREEN COVE SPRINGS FL 32043  |   |                          | 83                              | 1333 STARLING ROA  | <u>)</u>  |
| GREEN COVE SPRINGS PE 32043   |   | ;                        | 84 City                         |  | les   Zio Codo  |
|   |   |                          |                                 | MIDDLEBURG   | FL 85 Zip Code 32068  |
| 11. Pursuant to the provisions of Sections 617.0502 office or registered agent, or both, in the State | 2 and 617.1508, Florida Statu of Florida. Such change was | tes, the al<br>authorize | pove-named co<br>d_by the corpo | proporation submits this statement for the ration's board of directors. I hereby according to the control of th | purpose of changing its registered pt the appointment as registered |
| agent I am familiar with, and accept the obliga   |   | iorida Staj              | gtes.                           |  | 3/2/97  |
| SIGNATURE E. W. SILCOX, CI Signature, typed or printed name of registered agent                       |   | TE: Registere            | d Agent signature re            | guired when reinstating)   | DATE  |
| 12. OFFICERS AND  |   | 13.                      |                                 | ADDITIONS/CHANGES TO OFF   |   |
| D OILOON E.W.   | ☐ DELETE  | 1.1 T)                   | ľ                               | C  | ☐ Change 🔀 Addition   |
| NAME SILCOX, E.W. STREET ADDRESS 1333 STARLING RO   |   | 1.2 N                    | i                               | •  |   |
| STREET ADDRESS 1333 STARLING RU CITY-ST-ZIP MIDDLEBURG FL   |   |                          | TY-ST-ZIP                       |  |   |
| THE DT  | ☐ DELETE  | 21 Ti                    | +                               |  | Change Addition   |
| NAME WALSINGHAM, DONALD   |   | 22 N                     | AME                             |  |   |
| STREET ADDRESS 4007 MUSTANG RD  |   | 235                      | REET ADDRESS                    |  |   |
| CITY-ST-ZIP MIDDLEBURG FL   |   | 2 4 0                    | TY-ST-ZIP                       |  |   |
| TITLE D   | ☐ DELETE  | 3.1 TI                   | 1                               |  | Change Addition   |
| NAME WEST, VERNON STREET ADDRESS 1382 ALLIE MURRAY ROAD   |   | 3.2 N                    |                                 |  |   |
| MIDDLEDLIDG EL  |   |                          | IREET ADDRESS                   |  | •   |
| CITY-ST-ZIP MIDDLEBURG FL   | ☐ DELETE  | 4.1 TI                   | <del></del>                     |  | ☐ Change ☐ Addition   |
| NAME PADGETT, MARCUS  |   | 4.21                     |                                 |  |   |
| STREET ADDRESS 3850 C R 220   |   | 4.3 \$                   | TREET ADORESS                   |  |   |
| CITY-S1-ZIP MIDDLEBURG FL   |   | 4.4 C                    | TY-ST-21P                       |  |   |
| TITLE D   | DELETE  | 5.1 T                    | TLE                             |  | Change Addition   |
| NAME GREEN, MARK  |   | 5.2 N                    | AME                             |  |   |
| STREET ADDRESS 2789 BLACK CREEK DR.   |   | 5.3 S                    | TREET ADDRESS                   |  |   |
| CITY-ST-ZIP MIDDLEBURG FL   | De ter  | -                        | ITY-ST-ZIP                      |  | Aba 12/200  |
| TITLE D   | ☐ DELETE  | 6.1 T                    |                                 |  | Change Addition   |
| NAME CARLSON, LARRY   |   | 6.2 N                    |                                 |  |   |
| STREET ADDRESS 218 N MIMOSA   |   | 1                        | TREET ADDRESS                   |  |   |

14. I do 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: E. W. STLCOX Sala The

**FILED** 

Mar 05 1997 8:00am

Secretary of State

# BLACK POND BAPTIST CHURCH, INC. 3644 OLD JENNINGS ROAD MIDDLEBURG FL 32068-3734

### Additional officers and directors:

D WILLIAMSON, H. C. 3813 OLD JENNINGS ROAD MIDDLEBURG FL 32068

D CONAWAY, JIM 5642 MAVERICK ROAD MIDDLEBURG, FL 32068

D HALL, RUSSELL 5355 HWY 17 SOUTH GREEN COVE SPRINGS, FL 32043