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 # N41
1. Corporation Name

(2)

FIRST BAPTIST CHURCH OF LAWTEY, INC.

FILED Jan 24 1997 8:00am Secretary of State

Phone # 0000710

Principal Place of Business				Mailing Address				
P O BOX 256 ADAMS ST LAWTEY FL 32058				P O BOX 256 LAWTEY FL 32058-0256 US				
US	- 1000							3. Date Incorporated or Qualified 3a. Date of Last Report 04/02/1996
2. Principal Place of Business				2a. Mailing Address				4. FEI Number Applied For S9-3108241 Applied For
21				Suite, Apt. #, etc.				TWO Applicable
Suite, Apt. #, etc.				27				5. Certificate of Status Desired Fee Required
	City & State			City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip Country			28	Zip Country				Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199.032,
24	25		29	 		•		Florida Statutes
9, Name and Address of Currer			ent Registe	Registered Agent		L.,		10. Name and Address of New Registered Agent
						81	Name	
NORMAN, LARRY							Street Ad	ddress (P.O. Box Number is Not Acceptable)
ROUTE 1, BOX 802 LAWTEY FL 32058						B3		
LAT	LAWIET PL 32000					84	City	poug 85 Zip Code
								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								
ager	nt. I am familiar v	with, and accept the obl	ligations of,	Section 617.0503, F	lorida Sta	tutes	i.	1-9-97
SIGNATI	JREZ	ed or printed name of registered		man	TE Projetou	od Ago	at signat up so	equired when reinstating) DATE
12.	Signature type	OFFICERS A			13.	a ngo	nt signatore tec	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D			DELETE	1.1 7	ITLE		☐ Change ☐ Addition
NAME	NORM/	an, Paul			1.2 N	IAME	j	
STREET ADD		1, BOX 1124			1.3 \$	TREET	ADDRESS	
CITY-ST-ZI	P LAWTE	Y FL			1.40	ITY-S	T-ZIP	
TITLE	D			☐ DELETE	2.1 T	ITLE		Change Addition
NAME	T T	R, ROBERT			2.2 1	IAME		
STREET ADD		3OX 707			2.3 5	TAEET	ADDRESS	
CITY-ST-ZI		Y FL		DELETE	2. 4 t	CITY - S	ST-ZIP	Change Addition
TITLE NAME	D SELLE	RS, RONNIE		□ necese	1	IAME	1	California California
STREET ADD		OX 1345 N/A					ADDRESS	
CITY-ST-ZI	CTADY					CITY-S	1	·
TITLE	D	=		DELETE	_	ITLE	En	☐ Change ☐ Addition
NAME	TYLICZ	ZKA, ROBERT M			4.2	NAME	1	
STREET ADD	IRESS 1303 V	W. PRATT ST					ADDRESS	
CITY-ST-ZI	P STARK	E FL	·		4.4 (CITY-S	T-ZIP	
TITLE				DELETE	5.1 3	ITLE		☐ Change ☐ Addition
NAME					5.2	IAME		
STREET ADD	ress				5.3 9	TREET	ADDRESS	
CITY-ST-ZI	P			Dougra		HTY-5	T-ZIP	[Change Lagran
TITLE				DELETE	6.1 7			☐ Change ☐ Addition
NAME SYDEST ADS	unene					AME	*DODESS	
STREET ADE	1						ADDRESS	
14. I do		nat the information supp	lied with thi	s filing does not qua		exe		ated in Section 119.07(3)(i), Florida Statutes. I further certify that the
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.								