

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

APPROVED AND FILED

95 MAY -1 AM 10:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995



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

DOCUMENT # 193000005253
1. Corporation Name **AIRPORT BAPTIST CHURCH, INC.**

4930 DRAINFIELD ROAD,
Principal Place of Business
LAKELAND, FLORIDA, 33811

Mailing Address
621 E. LAKEHURST ST.
LAKELAND, FLORIDA,
33805
c/OPRESTON L. HERRINGTON

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **NOV. 22, 1993** 3a. Date of Last Report **nov. 22, 1993**

4. FEI Number **59-322-1337** Applied For Not Applicable

2. Principal Place of Business
21 **4930 DRAINFIELD ROAD** 2a. Mailing Address
621 E. LAKEHURST ST.

Suite, Apt. #, etc. Suite, Apt. #, etc.
22 **LAKELAND, FLORIDA, 33811** 2b. **LAKELAND, FLORIDA, 33805**

City & State City & State

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing **\$5.00 May Be Added to Fees**

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$68.75 Supplemental Fee Not Required**

24 Zip **33811** 25 Country **POLK** 29 Zip **33805** 30 Country **POLK**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
PRESTON L. HERRINGTON
621 E. LAKEHURST ST.
LAKELAND, FLORIDA, 33805

10. Name and Address of New Registered Agent

81 Name **PRESTON L. HERRINGTON**

82 Street Address (P.O. Box Number is Not Acceptable) **621 LAKEHURST ST.**

83 **LAKELAND, FL 33805**

84 City **LAKELAND** 85 Zip Code **FL 33805**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE PRESTON L. HERRINGTON (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	PRESIDENT
NAME	PRESTON L. HERRINGTON
STREET ADDRESS	621 E. LAKEHURST ST.
CITY - ST - ZIP	LAKELAND, FLORIDA, 33805
TITLE	VICE PRESIDENT
NAME	RAY EVERRET TURNER
STREET ADDRESS	933 WASENE AVENUE
CITY - ST - ZIP	LAKELAND, FLORIDA, 33809
TITLE	SECRETARY
NAME	VERNA JEAN SHEARIN
STREET ADDRESS	1423 SOUTHERN AVENUE
CITY - ST - ZIP	LAKELAND, FLORIDA, 33803
TITLE	TREASURE
NAME	ANGELA JEAN HERRINGTON
STREET ADDRESS	621 E. LAKEHURST ST.
CITY - ST - ZIP	LAKELAND, FLORIDA, 33805
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	TREASURE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME	ANGELA J. HERRINGTON
13 STREET ADDRESS	621 E. LAKEHURST ST.
14 CITY - ST - ZIP	LAKELAND, FLORIDA, 33805
21 TITLE	
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

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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 110.07(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: **PRESTON L. HERRINGTON** *Preston L. Herrington* 4/26/1995 686-1779

SIGNATURE AND TYPED ON PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR Date System Name

REMITTED BY MAY 1

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