


FILE NOW: FILING FEE IS \$61.25

FILED
May 19 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N93000005253 (0)
1. Corporation Name
AIRPORT BAPTIST CHURCH, INC.



Principal Place of Business 4930 DRAINFIELD RD. LAKELAND FL 33811	Mailing Address 621 E. LAKEHURST ST. LAKELAND FL 33805-3029
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3. Date Incorporated or Qualified 11/22/1993	3a. Date of Last Report 05/01/1996
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2. Principal Place of Business 21 Suite, Apt #, etc 22 City & State 23 Zip 24 Country	2a. Mailing Address 28 Suite, Apt #, etc 27 City & State 29 Zip 30 Country
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4. FEI Number 59-3221337	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

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

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD HERRINGTON, PRESTON L 621 E. LAKEHURST ST. LAKELAND FL 33805	1.1 TITLE	D Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/>
NAME		1.2 NAME	Harry M. Hensley
STREET ADDRESS		1.3 STREET ADDRESS	1705 US Hwy 98 N
CITY - ST - ZIP		1.4 CITY - ST - ZIP	Lakeland FL 33809
TITLE	VD FELDMAN, RONALD 3616 HOPEWELL AVE LAKELAND FL	2.1 TITLE	D Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/>
NAME		2.2 NAME	Jane Ramsey
STREET ADDRESS		2.3 STREET ADDRESS	P.O. Box 35
CITY - ST - ZIP		2.4 CITY - ST - ZIP	Bradley FL 33635
TITLE	SD SHEARIN, VERNA J 1423 SOUTHERN AVE. LAKELAND FL 33803	3.1 TITLE	D Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/>
NAME		3.2 NAME	Chuck Meredith
STREET ADDRESS		3.3 STREET ADDRESS	3340 N. Galloway Rd
CITY - ST - ZIP		3.4 CITY - ST - ZIP	Lakeland FL 33809
TITLE	TD HERRINGTON, ANGELA J 621 E. LAKEHURST ST. LAKELAND FL 33805	4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	T HERRINGTON, ANGELA J 621 E. LAKEHURST ST. LAKELAND FL 33805	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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: Preston Herrington **SIGNATURE REQUIRED** 5/1/97 941-686-1779
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone # 0052760

CR2E037 (9/96)