

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N94000003198 (8)

1. Corporation Name

KING BOULEVARD BAPTIST CHURCH, INC.



Principal Place of Business

2410 E. EMMA STREET
TAMPA FL 33610

Mailing Address

2410 E. EMMA STREET
TAMPA FL 33610

3. Date Incorporated or Qualified
06/28/1994

3a. Date of Last Report
04/25/1995

2. Principal Place of Business

21 1914 E. Martin Luther King
BLVD

Suite, Apt. #, etc.

22 City & State

23 TAMPA, FLORIDA

24 Zip 33610

Country

2a. Mailing Address 1914 E. Martin

26 Luther King JR. BLVD.

Suite, Apt. #, etc.

27 City & State

28 TAMPA, FLORIDA

29 Zip 33610

Country

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

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

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CARLEY, WILSON SR.
2410 E. EMMA STREET
TAMPA FL 33610

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME CARLEY, WILSON SR.
STREET ADDRESS 2410 E. EMMA STREET
CITY-ST-ZIP TAMPA FL 33610

11 TITLE ☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME CARLEY, LYDIA
STREET ADDRESS 2410 E. EMMA STREET
CITY-ST-ZIP TAMPA FL 33610

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

TITLE S ☒ DELETE
NAME BUTLER, MAUREEN
STREET ADDRESS 2315 N. 52ND STREET
CITY-ST-ZIP TAMPA FL

31 TITLE ☒ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME STEWART, JOSEPH
STREET ADDRESS 1315 E. 33RD AVENUE
CITY-ST-ZIP TAMPA FL 33610

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

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 119.07(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: *Wilson Carley Sr.* WILSON CARLEY

4/25/96 (813) 238-1757

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)