FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

N94000004314 (0) DOCUMENT #

FIRST BAPTIST CHURCH OF SEVILLE, INC.

Principal Place of Business Mailing Address 200 NORTH CHURCH ST. P.O.BOX 127 3. Date Incorporated or Qualified **SEVILLE FL 32190-0127** SEVILLE FL 32190 <u>08/30/1994</u> 4. FEI Number Applied For Not Applicable <u>59-2119484</u> 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes S No 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes 29 30 24 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name PURVIS, JAMES E Street Address (P.O. Box Number is Not Acceptable) 600 PURVIS RD. 83 SEVILLE FL 32190 84 City 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) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE. Change Addition TITLE TP 1.1 TITLE NAME -YELVINGTON, RICHARD 1.2 NAME GASTON W. BOYETTE 566 TURKEY SHOOT RD P.O. BOX 86 -1116 MCGLON RD. 1.3 STREET ADDRESS STREET ADDRESS PIERSON FL 02100 CITY-ST-ZIP 1.4 CITY-ST-ZIP SEVILLE, GL. 32190 **N** DELETE Change Addition TITLE TST 2.1 TITLE 455 PURMS, JAMES E NAME 2.2 NAME CLAY MEW 000 PURVIS RD. 132 PARK DR. P.O. BOY 356 STREET ADDRESS 2.3 STREET ADDRESS SEVILLE FL 92190 CITY-ST-ZIP 2.4 CITY-ST-ZIP SEVILLE FL. 32190 DELETE TITLE 3.1 TITLE NAME GAMBLE, GREG V 3.2 NAME 2400 CADE FERNERY RD 3.3 STREET ADDRESS STREET ADDRESS SEVILLE FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE HAYNES, RUSSELL 4. 2 NAME NAME **570 RAULERSON RD** 4.3 STREET ADDRESS STREET ADDRESS SEVILLE FL City-St-ZIP 4.4 CITY-ST-ZIP DELETE Addition TITLE 51 TITLE LANCE MEW FLOWERS, JEAN NAME 5.2 NAME P.O Box 500 HARRISON AVE 132 PARK DR. 235 LAKE GEORGE RD. STREET ADDRESS 5.3 STREET ADDRESS 246 ORANGE PARK FL CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition TITLE 6.1 TITLE 62 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

14. I 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:

FILED

Mar 18 1998 8:00am

Secretary of State