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Jan 31 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # N94000006001 (1)

1. Corporation Name

THE FLORIDA STATE ASSOCIATION OF FREE WILL BAPTISTS, INCORPORATED



Principal Place of Business

Mailing Address

2156 54TH AVENUE
VERO BEACH FL 32966

2156 54TH AVENUE
VERO BEACH FL 32966-2168

3. Date Incorporated or Qualified
12/05/1994

3a. Date of Last Report
02/01/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
59-2386615

Applied For
Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

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

22 City & State

27 City & State

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

23 Zip

25 Country

28 Zip

30 Country

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

BRYANT, RANDALL REV.
2156 54TH AVENUE
VERO BEACH FL 32966

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 BUSER, LONNIE REV.
STREET ADDRESS 5070 PAT PLACE
CITY-ST-ZIP WEST PALM BEACH FL

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE D DELETE
NAME OWEN, TIM REV.
STREET ADDRESS 5410 HWY 99
CITY-ST-ZIP CENTURY FL

2.1 TITLE Change Addition
2.2 NAME Owen, Tim Rev.
2.3 STREET ADDRESS 185 E. Haines Blvd.
2.4 CITY-ST-ZIP Lake Alfred, FL 33856

TITLE D DELETE
NAME BRYANT, RANDALL REV.
STREET ADDRESS 2156 54TH AVENUE
CITY-ST-ZIP VERO BEACH FL

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE D DELETE
NAME COLLINS, TOM
STREET ADDRESS 2248 PALMVIEW CIRCLE
CITY-ST-ZIP AUBURNDALE FL

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
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:

Randall Bryant
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/7/97 501-867-1956
Date Daytime Phone # 0020951

CR2E037 (9/96)