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Mar 04 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N95000003777 (8)

1. Corporation Name

NEW BIRTH BAPTIST CHURCH OF PENSACOLA, INC.

Principal Place of Business

1610 NORTH 'O' STREET
PENSACOLA FL 32505

Mailing Address

1610 NORTH 'O' STREET
PENSACOLA FL 32505-6448



3. Date Incorporated or Qualified
08/07/1995

3a. Date of Last Report
04/12/1996

4. FEI Number
59-2587249

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

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BROWN, CHARLES
3897 HOLLYWOOD AVE
PENSACOLA FL 32505

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 CHARLES BROWN, CHAIRMAN

2/19/97

2/19/97

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

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME FINDLEY, WALTER
STREET ADDRESS 3209 WEST CROSS STREET
CITY-ST-ZIP PENSACOLA FL 32505

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

TITLE D ☐ DELETE
NAME BROWN, CHARLES
STREET ADDRESS 3897 HOLLYWOOD AVENUE
CITY-ST-ZIP PENSACOLA FL 32505

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME BURKETTE, TIMOTHY
STREET ADDRESS 4600 TWIN OAKS DRIVE
CITY-ST-ZIP PENSACOLA FL 32508

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

TITLE D ☐ DELETE
NAME JACKSON, CLIFFORD
STREET ADDRESS 22 ARCHER AVENUE
CITY-ST-ZIP PENSACOLA FL 32505

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

TITLE SD ☐ DELETE
NAME STANLEY, BERTHA
STREET ADDRESS 72 MORRIS COURT
CITY-ST-ZIP PENSACOLA FL 32505

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

TITLE D ☐ DELETE
NAME ULMER, WILLIAM
STREET ADDRESS 1610 NORTH 'O' STREET
CITY-ST-ZIP PENSACOLA FL 32505

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: Charles Brown CHARLES BROWN

2-19-97

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 331-1617

CR2E037 (9/96)