

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 6/3/93: \$155 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$395)

NONPROFIT
CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 14 AM 9:22

DOCUMENT # 760847 (4)

1. Corporation Name

FIRST BAPTIST CHURCH OF JACKSONVILLE, FLORIDA IN
C.

Principal Place of Business

Mailing Address

124 WEST ASHLEY STREET
JACKSONVILLE FL 32202

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JACKSONVILLE FL 32202

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 11/30/1981	3a. Date of Last Report 04/20/1994
4. FEI Number 59-0823939	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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒	FILING FEE IS \$61.25
8. This corporation has liability for franchise tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Zip	30. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DAVIS, MARSHALL
SUITE 620, 233 E. BAY STREET
JACKSONVILLE FL 32202

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. City	FL

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	VD	11. TITLE	☐ Change ☐ Addition
NAME	SOUD, A. C.	12. NAME	
STREET ADDRESS	3738 RIVER HALL DRIVE	13. STREET ADDRESS	SAME
CITY - ST - ZIP	JACKSONVILLE, FL 00000	14. CITY - ST - ZIP	
TITLE	PD	21. TITLE	☐ Change ☐ Addition
NAME	SWAIN, WILLIAM R	22. NAME	
STREET ADDRESS	3713 TIMUCUA TRAIL	23. STREET ADDRESS	SAME
CITY - ST - ZIP	JACKSONVILLE, FL 00000	24. CITY - ST - ZIP	
TITLE	SD	31. TITLE	☐ Change ☐ Addition
NAME	DAVIS, MARSHALL D	32. NAME	
STREET ADDRESS	4130 MCGIRT BLVD.	33. STREET ADDRESS	SAME
CITY - ST - ZIP	JACKSONVILLE FL	34. CITY - ST - ZIP	
TITLE	TD	41. TITLE	☐ Change ☐ Addition
NAME	WHORTON, JUDSON S	42. NAME	
STREET ADDRESS	5443 JOHN REYNOLDS DRIVE	43. STREET ADDRESS	SAME
CITY - ST - ZIP	JACKSONVILLE, FL 00000	44. CITY - ST - ZIP	
TITLE	SD	51. TITLE	☐ Change ☐ Addition
NAME	STURGILL, NELSON	52. NAME	
STREET ADDRESS	2230 WINDING CREEK LANE	53. STREET ADDRESS	SAME
CITY - ST - ZIP	JACKSONVILLE, FL 00000	54. CITY - ST - ZIP	
TITLE	TD	61. TITLE	☐ Change ☐ Addition
NAME	BLOUNT, JOHN O.	62. NAME	
STREET ADDRESS	6284 RIVIERA LANE	63. STREET ADDRESS	SAME
CITY - ST - ZIP	JACKSONVILLE, FL 00000	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 110.07(3)(b), 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 member 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #