

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

FILED
Mar 07 1996 8:00 am
Secretary of State

DOCUMENT # **736220** (5)

1. Corporation Name

BRANDY BRANCH BAPTIST CHURCH, INC.

Principal Place of Business

Mailing Address

**BRANDY BRANCH RD
RT 1 BOX 396
BRYCEVILLE FL 32009
US**

**HORSESHOE CIRCLE
RT. 1. BOX 424
BRYCEVILLE FL 32009**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/28/1976		3a. Date of Last Report 06/09/1995	
21		26		4. FEI Number 23-7140640		Applied For Not Applicable	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
23 City & State		28 City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Zip		25 Country		29 Zip		30 Country	
24		25		29		30	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FOURAKER, CLYDE E., SR.
FOURAKER LANE, ROUTE 1, BOX 600
BRYCEVILLE FL 32009**

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	VD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRADDOCK, ROY B	1.2 NAME	
STREET ADDRESS	RT 1 BOX 432	1.3 STREET ADDRESS	
CITY-ST-ZIP	BRYCEVILLE, FL 00000	1.4 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOYD, HENSON H.	2.2 NAME	
STREET ADDRESS	RT. 1, BOX 555	2.3 STREET ADDRESS	
CITY-ST-ZIP	BRYCEVILLE FL	2.4 CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FOURAKER SR, CLYDE E	3.2 NAME	
STREET ADDRESS	RT 1 BOX 600	3.3 STREET ADDRESS	
CITY-ST-ZIP	BRYCEVILLE, FL 00000	3.4 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TRAVIS, RICHARD	4.2 NAME	
STREET ADDRESS	RT 1 BOX 424	4.3 STREET ADDRESS	
CITY-ST-ZIP	BRYCEVILLE, FL 00000	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SESSOMS, RUSSELL	5.2 NAME	
STREET ADDRESS	RT. 1, BOX 16	5.3 STREET ADDRESS	
CITY-ST-ZIP	BRYCEVILLE FL	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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:

Richard Travis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Richard Travis

2-29-96
Date

904-266-4314
Daytime Phone #

CR2E037 (12/95)