

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
 AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT CORPORATION
 ANNUAL REPORT
 1996



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

DOCUMENT # 702658 (6)
 1. Corporation Name
THE GREATER FRIENDSHIP BAPTIST CHURCH OF DAYTONA BEACH, FL INC.



Principal Place of Business Mailing Address
539 CYPRESS STREET DAYTONA BEACH FL 32114-2639 **539 CYPRESS STREET DAYTONA BEACH FL 32114-2639**

3. Date Incorporated or Qualified **01/24/1972** 3a. Date of Last Report **08/10/1995**

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

4. FEI Number **59-2769695** 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

9. Name and Address of Current Registered Agent
MCKENZIE, REVEREND JOHN
420 FLETCHER AVENUE
DAYTONA BEACH FL 32114

10. Name and Address of New Registered Agent
 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TOOLEY, OSCAR	1.2 NAME	
STREET ADDRESS	901 MAGNOLIA AVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BCH FL	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOUSTON, GEORGE	2.2 NAME	
STREET ADDRESS	701 MAGNOLIA AVENUE	2.3 STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH FL	2.4 CITY-ST-ZIP	
TITLE	S <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ROLAND, ROSE M.	3.2 NAME	Clayton, Bobby (Mrs.)
STREET ADDRESS	1409 CADILLAC	3.3 STREET ADDRESS	133 Aleatha Drive
CITY-ST-ZIP	DAYTONA BCH FL	3.4 CITY-ST-ZIP	Daytona Beach, FL 32114
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROLAND, THOMAS	4.2 NAME	
STREET ADDRESS	1409 CADILLAC	4.3 STREET ADDRESS	176 Big Ben Drive
CITY-ST-ZIP	DAYTONA BCH FL	4.4 CITY-ST-ZIP	Daytona Beach, FL 32117
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHURCH, ANTHONY P	5.2 NAME	
STREET ADDRESS	124 VILLAGE LN	5.3 STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BCH FL	5.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCARLETT, CARLTON	6.2 NAME	
STREET ADDRESS	318 JEFFERSON ST	6.3 STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BCH FL	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: Anthony P. Church **REQUIRED** July 31, 1996 252-0322
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (3/96)