

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 19 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 723131 (9)

1. Corporation Name

PASADENA BAPTIST CHURCH OF DADE CITY INCORPORATE
D

Principal Place of Business

Mailing Address

35845 CLINTON AVE.
DADE CITY FL 33525-843735845 CLINTON AVE.
DADE CITY FL 33525-84553. Date Incorporated or Qualified
04/11/19723a. Date of Last Report
02/09/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25 29 30

4. FEI Number

59-1389057

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

MARTIN, WILLIAM S.
35845 CLINTON AVE.
DADE CITY FL 33525-8437

10. Name and Address of New Registered Agent

81 Name Ralph L. HOLBROOK

82 Street Address (P.O. Box Number is Not Acceptable)
35845 Clinton Ave.

83

84 City Dade City

FL

85 Zip Code 33525-8455

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

Ralph L. Holbrook

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME MARTIN, WILLIAM S.
STREET ADDRESS 35845 CLINTON AVE.
CITY-ST-ZIP DADE CITY FL 33525-8437TITLE AT
NAME CRAWFORD, RILEY
STREET ADDRESS 9112 JANMAR RD.
CITY-ST-ZIP DADE CITY FLTITLE SD
NAME DEWEY, CHARLES
STREET ADDRESS 38850 LACOOCHEE PARK RD
CITY-ST-ZIP LACOOCHEE FLTITLE TD
NAME PUCKETT, HERBERT L.
STREET ADDRESS 1290 PUCKETT RD. 15212
CITY-ST-ZIP DADE CITY FLTITLE
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P
1.2 NAME Ralph L. Holbrook
1.3 STREET ADDRESS 35845 Clinton Ave.
1.4 CITY-ST-ZIP Dade City FL 33525-84552.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP6.1 TITLE
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 Herbert L. Puckett 1-24-97 3021
352-567

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 3021

CR2E037 (9/96)