FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 760847

(4)

FIRST BAPTIST CHURCH OF JACKSONVILLE, FLORIDA IN C.

Principal Place of Business

Mailing Address

FILED Mar 26 1997 8:00am Secretary of State



124 WEST ASHLEY STREET ACKSONVILLE FL 32202		124 WEST ASHLEY STREET JACKSONVILLE FL 32202-3104						
					3. Date Incorporated or Qualified 11/30/1981	3a. Date of Last R 03/06/199		
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	A	oplied For	
21		26			59-0823939	No	ot Applicable	
Suite, Apt #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & Stat		City & State	28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country	Zıp	Country		8. This corporation has liability for i		. 199.032,	
24	4 25 29 30 9. Name and Address of Current Registered Agent				Florida Statutes Yes No 10. Name and Address of New Registered Agent			
	y. Name and Address of Currer	nt Hegistered Agent	81	Name	10. Name and Address of New Re	gistered Agent		
				Hairib				
DAVIS, MARSHALL SUITE 620, 233 E. BAY STREET				82 Street Address (P.O. Box Number is Not Acceptable) 83				
JACKSONVILLE FL 32202			03					
			84	,		FL "	Code	
 office of r 	to the provisions of Sections 617.050 registered agent, or both, in the State im familiar with, and accept the oblig	e of Florida. Such change was au	ithorized b	v the corpora	poration submits this statement for the pation's board of directors. I hereby accept	urpose of changing in the appointment as	ts registered registered	
SIGNATURE								
12.	Signature typed or printed name of registered agr	ent and title if applicable (NOTE: D DIRECTORS		ent signature requ	ared when reinstating)	DATE	20.151.40	
TITLE	1	DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFIC	Change	Addition	
NAME	VD SOUD, A. C.		1.2 NAME			Criange	La Addition	
STREET ADDRESS	3738 RIVER HALL DRIVE			T ADDRESS			;	
CITY-ST-ZIP	JACKSONMILLE, FL 00000		1.4 CITY-	1				
TITLE	PD	DELETE	2.1 TITLE	31-2 r		Change	Addition	
NAME	_		22 NAME				Carl Production	
STREET ADDRESS	3713 TIMUCUA TRAIL			T ADDRESS			1	
CITY-ST-ZIP			2. 4 CITY-					
TITLE	\$0	☐ DELETE 31TI				Change	☐ Addition	
NAME	DAVIS, MARSHALL D	32 N				-		
STREET ADDRESS	4130 MCGIRTS BLVD.		3 3 STREE	T ADDRESS				
CITY-SI-ZIP	JACKSONVILLE FL			ST-ZIP				
TITLE	TD	DELETE 4.1 YO				☐ Change	Addition	
NAME	WHORTON, JUDSON S		4. 2 NAME					
STREET ADDRESS	5443 JOHN REYNOLDS DRIVE		4.3 STREE	T ADDRESS			i	
CHTY - ST - ZIP	JACKSONVILLE, FL 00000		4.4 DITY-	ST-ZIP				
TITLE	SD	DELETE 5.1 TIT				☐ Change	☐ Addition	
NAME	STURGILL, NELSON		5.2 NAME					
STREET ADDRESS	13746 BROMLEY POINTE DR		5.3 STREE	T ADDRESS				
CITY-ST-ZIP	JACKSONVILLE, FL 00000		5.4 City-5	ST - ZIP				
TITLE	TD	☐ DELETE	6.1 TITLE	}		☐ Change	Addition	
NAME	BLOUNT, JOHN O.		6.2 NAME					
STREET ADDRESS	6264 RIVIERA LANE		6.3 STREE	ADDRESS				
City-St-ZiP	JACKSONVILLE, FL 00000		6.4 CITY -		d in Castino 140 07/21/3) Florida Chabita			

4. 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 empowerful 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:

URE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

7/19/97 (904

W J66-1221