


FILE NOW: FILING FEE IS \$61.25

FILED  
Apr 13 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 743376 (6) 1. Corporation Name THE FIRST BAPTIST CHURCH OF BRANFORD, INC.					
Principal Place of Business BRANFORD PROFESSIONAL BUILDING PLANT AVE. BRANFORD FL 32008			Mailing Address BRANFORD PROFESSIONAL BUILDING PLANT AVE. BRANFORD FL 32008		
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 06/26/1978 4. FEI Number 59-1203217 Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		9. Name and Address of Current Registered Agent SCOTT, JOHN L BRANFORD PROFESSIONAL BUILDING PLANT AVE. BRANFORD FL 32008			
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 _____ Signature, typed or printed name of registered agent and title if applicable					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE T NAME FLETCHER, ROBERT STREET ADDRESS PO BOX 408 (N/A) CITY-ST-ZIP BRANFORD FL			1.1 TITLE T 1.2 NAME BARNES, DAVID 1.3 STREET ADDRESS P O BOX 131 (N/A) 1.4 CITY-ST-ZIP BRANFORD, FL		
TITLE T NAME FRIERSON, WD STREET ADDRESS 7731 CR 248 CITY-ST-ZIP O'BRIEN FL			2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		
TITLE T NAME GAYLARD, A.W. STREET ADDRESS 27090 37TH ROAD CITY-ST-ZIP BRANFORD FL			3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP		
TITLE CT NAME PERLOWICH, AARON STREET ADDRESS 30279 73RD PL CITY-ST-ZIP BRANFORD FL			4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
TITLE T NAME MOSES, ODESSA STREET ADDRESS RT 1 BOX 25 CITY-ST-ZIP BRANFORD FL			5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
TITLE T NAME SESSIONS, WALLACE STREET ADDRESS 23216 CHINQUAPIN RD CITY-ST-ZIP BRANFORD FL			6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		

14. I 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.

CR2E037 (10/97)



935-3434  
APR 13 1998