

**FILE NOW: FILING FEE IS \$61.25**

**FILED**  
**Apr 13 1998 8:00am**  
**Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 736220 (5)**  
 1. Corporation Name  
**BRANDY BRANCH BAPTIST CHURCH, INC.**



Principal Place of Business <b>BRANDY BRANCH RD                  RT 1 BOX 396                  BRYCEVILLE FL 32009                  US</b>	Mailing Address <b>HORSESHOE CIRCLE                  RT. 1. BOX 424                  BRYCEVILLE FL 32009</b>
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3. Date Incorporated or Qualified <b>06/28/1976</b>	Applied For <input type="checkbox"/> Not Applicable
4. FEI Number <b>23-7140640</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
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	

2. Principal Place of Business <b>21</b> Suite, Apt. #, etc. <b>22</b> City & State <b>23</b> Zip Country <b>24</b>	2a. Mailing Address <b>26</b> Suite, Apt. #, etc. <b>27</b> City & State <b>28</b> Zip Country <b>29</b>
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**9. Name and Address of Current Registered Agent**

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

**10. Name and Address of New Registered Agent**

<b>81</b> Name
<b>82</b> Street Address (P.O. Box Number is Not Acceptable)
<b>83</b>
<b>84</b> City <b>FL</b> <b>85</b> 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**

TITLE	<b>VD</b> <input type="checkbox"/> DELETE
NAME	<b>BRADDOCK, ROY B</b>
STREET ADDRESS	<b>RT 1 BOX 432</b>
CITY-ST-ZIP	<b>BRYCEVILLE, FL 00000</b>
TITLE	<b>SD</b> <input type="checkbox"/> DELETE
NAME	<b>BOYD, HENSON H.</b>
STREET ADDRESS	<b>RT. 1, BOX 555</b>
CITY-ST-ZIP	<b>BRYCEVILLE FL</b>
TITLE	<b>PD</b> <input type="checkbox"/> DELETE
NAME	<b>FOURAKER SR, CLYDE E</b>
STREET ADDRESS	<b>RT 1 BOX 600</b>
CITY-ST-ZIP	<b>BRYCEVILLE, FL 00000</b>
TITLE	<b>TD</b> <input type="checkbox"/> DELETE
NAME	<b>TRAVIS, RICHARD</b>
STREET ADDRESS	<b>RT 1 BOX 424</b>
CITY-ST-ZIP	<b>BRYCEVILLE, FL 00000</b>
TITLE	<b>D</b> <input type="checkbox"/> DELETE
NAME	<b>SESSOMS, RUSSELL</b>
STREET ADDRESS	<b>RT. 1, BOX 16</b>
CITY-ST-ZIP	<b>BRYCEVILLE FL</b>
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
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.

SIGNATURE \_\_\_\_\_

CR2E037 (10/97)