

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002925

Entity Name: BAPTIST TOWERS FOUNDATION, INC.**Current Principal Place of Business:**1400 LEBARON AVENUE
JACKSONVILLE, FL 32207**Current Mailing Address:**POST OFFICE BOX 56098
JACKSONVILLE, FL 32241 US**FEI Number:** 59-3657249**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CUTHBERTSON, CHARLES
12857 BAY PLANTATION DRIVE
JACKSONVILLE, FL 32223 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** CHARLES CUTHBERTSON

04/26/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name CUTHBERTSON, CHARLES
Address 12857 BAY PLANTATION DRIVE
City-State-Zip: JACKSONVILLE FL 32223

Title DIRECTOR, VP
Name ROWE, LEE III
Address 8343 ROYALWOOD DRIVE
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name GRANT, BILL
Address 10350 DEERWOOD CLUB RD
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name MITCHELL, JOHN A III
Address 4444 CATHEYS CLUB LANE
City-State-Zip: JACKSONVILLE FL 32224

Title DIRECTOR, SECRETARY
Name SOLANKA, HEATHER
Address 3120 HOLLOW TREE COURT
City-State-Zip: JACKSONVILLE FL 32216

Title DIRECTOR
Name VALENT, ANNA
Address 1019 ELDER LANE
City-State-Zip: JACKSONVILLE FL 32207

Title DIRECTOR, TREASURER
Name EDWARDS, DANNY
Address 9908 VINEYARD LAKE LN
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name HILL, MARSHALL
Address 373 ROYAL TERN ROAD SOUTH
City-State-Zip: PONTE VEDRA BEACH FL 32082

Continues on page 2

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: CHARLES CUTHBERTSON

PRESIDENT

04/26/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

| | |
|-----------------|------------------------|
| Title | DIRECTOR |
| Name | SINGLETARY, BRUCE |
| Address | 12434 ROYAL TROON LANE |
| City-State-Zip: | JACKSONVILLE FL 32224 |