

# FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # 700140**

**(7)**

1. Corporation Name

**GLENDAL BAPTIST CHURCH, INC.**

Principal Place of Business

**790 27TH AVENUE  
VERO BEACH FL 32968**

Mailing Address

**790 27TH AVENUE  
VERO BEACH FL 32968**

**FILED**  
**Apr 25, 1996 08:00 AM**  
**Secretary of State**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>11/13/1959</b>		3a. Date of Last Report <b>05/01/1995</b>	
21. Suite, Apt. #, etc.		26. Suite, Apt. #, etc.		4. FEI Number <b>59-1523077</b>		Applied For Not Applicable	
22. City & State		27. City & State		5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
23. Zip		28. Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
24. Country		29. Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

## 9. Name and Address of Current Registered Agent

**BLAIR, GLENN  
2846 4TH STREET  
VERO BEACH FL 32962**

## 10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Not Allowed)	<b>2846 4TH STREET</b>
83. City	<b>VERO BEACH FL 32962</b>
84. City	<b>VERO BEACH FL 32962</b>
85. Zip Code	<b>32962</b>

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>STD</b>	1.1 TITLE	<b>P</b>
NAME	<b>MARTIN, THOMAS</b>	1.2 NAME	<b>Martin, Thomas</b>
STREET ADDRESS	<b>2885 1ST LN.</b>	1.3 STREET ADDRESS	<b>2885 1st Lane</b>
CITY-ST-ZIP	<b>VERO BEACH FL</b>	1.4 CITY-ST-ZIP	<b>Vero Beach, FL 32968</b>
TITLE	<b>PD</b>	2.1 TITLE	<b>V</b>
NAME	<b>BLAIR, GLENN M</b>	2.2 NAME	<b>King, Tommy W.</b>
STREET ADDRESS	<b>2846 4TH ST.</b>	2.3 STREET ADDRESS	<b>162 Harris Dr.</b>
CITY-ST-ZIP	<b>VERO BEACH FL</b>	2.4 CITY-ST-ZIP	<b>Sebastian, FL 32958</b>
TITLE	<b>VD</b>	3.1 TITLE	<b>T</b>
NAME	<b>LARSEN, WILLIAM P.</b>	3.2 NAME	<b>Gromen, John</b>
STREET ADDRESS	<b>826 10TH AVE.</b>	3.3 STREET ADDRESS	<b>14434 Azucena Ct.</b>
CITY-ST-ZIP	<b>VERO BEACH FL</b>	3.4 CITY-ST-ZIP	<b>Ft. Pierce, FL 34951</b>
TITLE		4.1 TITLE	<b>T (Asst.)</b>
NAME		4.2 NAME	<b>Larsen, Pat</b>
STREET ADDRESS		4.3 STREET ADDRESS	<b>826 10th Ave.</b>
CITY-ST-ZIP		4.4 CITY-ST-ZIP	<b>Vero Beach, FL 32960</b>
TITLE		5.1 TITLE	<b>S</b>
NAME		5.2 NAME	<b>Moore, Melanie</b>
STREET ADDRESS		5.3 STREET ADDRESS	<b>950 32nd Ave. SW</b>
CITY-ST-ZIP		5.4 CITY-ST-ZIP	<b>Vero Beach, FL 32968</b>
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-16-96

407-388-2326

Date

Daytime Phone #

CR2E037 (12/95)