

**NONPROFIT CORPORATION ANNUAL REPORT 1995**



Florida Department of State  
 Bureau of Information  
 Secretary of State  
 DIVISION OF CORPORATIONS

**FILED**

95 JUL -7 AM 8 43

SECRETARY OF STATE  
 TALLAHASSEE FLORIDA

DOCUMENT # **700458** (3)

1. Corporation Name  
**MYRTLE GROVE BAPTIST CHURCH INC**

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address  
**5920 LILLIAN WAY PO BOX 3159**  
**PENSACOLA FL 32508 PENSACOLA FL 32516**  
**US**

3. Date Incorporated or Qualified **02/17/1960** 3a. Date of Last Report **03/03/1994**

4. FEI Number **59-0879136** Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address  
 21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
 22 City & State 27 City & State  
 23 Zip 28 Country 29 Zip 30 Country

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status  **FILING FEE IS \$61.25**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent  
**DAVIS, LINDA C**  
**2040 BRENDA AVE**  
**PENSACOLA FL 32506**

10. Name and Address of New Registered Agent  
 81 Name  **Mr. Dowdell A. Barnes, Jr.**  
 82 Street Address (P.O. Box Number is Not Acceptable)  **7021 Fabiano St.**  
 83 City  **Pensacola** FL 85 Zip Code **32506**

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 **DOWDELL A. BARNES, JR.** *Dowdell A. Barnes* DATE **6-29-95**

12. OFFICERS AND DIRECTORS	
TITLE	<b>D</b>
NAME	<b>HOWELL, GORDON</b>
STREET ADDRESS	<b>7102 CLYSDALE DR</b>
CITY-ST-ZIP	<b>PENSACOLA FL</b>
TITLE	<b>VD</b>
NAME	<b>BOYD, EARL B</b>
STREET ADDRESS	<b>2099 NORTH 58TH AVE</b>
CITY-ST-ZIP	<b>PENSACOLA FL</b>
TITLE	<b>TD</b>
NAME	<b>DAVIS, LINDA C</b>
STREET ADDRESS	<b>2040 BRENDA AVE</b>
CITY-ST-ZIP	<b>PENSACOLA FL</b>
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>D</b>
1.3 STREET ADDRESS	<b>Keistler, Charles</b>
1.4 CITY-ST-ZIP	<b>8129 Westbourne Drive</b> <b>Pensacola, FL 32506</b>
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	<b>VD</b>
2.3 STREET ADDRESS	<b>Horne, Robert C.</b>
2.4 CITY-ST-ZIP	<b>1823 Sandra Drive</b> <b>Pensacola, FL 32506</b>
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	<b>TD</b>
3.3 STREET ADDRESS	<b>Barnes, Dowdell A.</b>
3.4 CITY-ST-ZIP	<b>7021 Fabiano St.</b> <b>Pensacola, FL 32506</b>
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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(4), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Dowdell A. Barnes* DATE **6-8-95** ORIGINAL FILING # **984 455-1989**

CR2E037 (3/95)