

FILE NOW: FILING FEE IS \$61.25

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Apr 06 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 700814 (7)
 1. Corporation Name
FIRST BAPTIST CHURCH OF FORT WALTON BEACH, FLORIDA, INC.

Principal Place of Business 21 FIRST STREET, SE FT WALTON BEACH FL 32548-5068	Mailing Address 21 FIRST STREET, SE FT WALTON BEACH FL 32548-5068
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3. Date Incorporated or Qualified 04/15/1960	
4. FEI Number 59-0903306	Applied For <input type="checkbox"/> 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 checked="" 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 checked="" type="checkbox"/> No	

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
24	Country	29	Zip
25		30	

9. Name and Address of Current Registered Agent
**GOODWIN, ROBERT A. JR.
 600 PELHAM RD.
 FT. WALTON BEACH FL 32547**

10. Name and Address of New Registered Agent	
81 Name DR WESLEY R YATES	
82 Street Address (P.O. Box Number Is Not Acceptable) 721 REVERE AVENUE	
83 City FORT WALTON BEACH FL 32547	
84 City FORT WALTON BEACH FL	85 Zip Code 32547

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 *Wesley R. Yates* **Wesley R. Yates Administrator** **3/30/98**
 Signature, typed & printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		
TITLE	PO	<input checked="" type="checkbox"/> DELETE
NAME	GOODWIN, ROBERT A. JR.	
STREET ADDRESS	600 PELHAM RD.	
CITY-ST-ZIP	FT. WALTON BEACH FL 32547	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	WIMBERLY, CHARLES H.	
STREET ADDRESS	531 E. MIRACLE STRIP #21	
CITY-ST-ZIP	MARY ESTHER FL 32569	
TITLE	D	<input type="checkbox"/> DELETE
NAME	TAYLOR, WALT	
STREET ADDRESS	12 POPLAR AVENUE	
CITY-ST-ZIP	SHALIMAR FL	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	MCBRYDE, MARIAN	
STREET ADDRESS	332 NE OKALOOSA RD.	
CITY-ST-ZIP	FT WALTON BCH FL 32548	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	LUCKIE, MARGARET	
STREET ADDRESS	96 YACHT CLUB DR #8	
CITY-ST-ZIP	FT WALTON BCH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BELL, BILL	
STREET ADDRESS	171 BEAL PKWY	
CITY-ST-ZIP	FT WALTON BCH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	PRESIDENT OF BOARD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	WIMBERLY, CHARLES H	
1.3 STREET ADDRESS	531 E MIRACLE STRIP PKWY	
1.4 CITY-ST-ZIP	MARY ESTHER FL 32569	
2.1 TITLE	VPRESIDENT OF BOARD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	SETTERBERG, DONALD	
2.3 STREET ADDRESS	11 RUE DE LE ROI ST NE	
2.4 CITY-ST-ZIP	FORT WALTON BEACH FL 32547	
3.1 TITLE	SEC/TREAS. OF BOARD	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	MARTIN, HUGH	
3.3 STREET ADDRESS	270 EWING CT NW	
3.4 CITY-ST-ZIP	FORT WALTON BEACH FL 32548	
4.1 TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	KILLINGSWORTH, BOBBY	
4.3 STREET ADDRESS	238 CREWILLA DRIVE	
4.4 CITY-ST-ZIP	FORT WALTON BEACH FL 32548	
5.1 TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	HUDGENS, ROBERT S	
5.3 STREET ADDRESS	256 VENTURA CIRCLE	
5.4 CITY-ST-ZIP	FORT WALTON BEACH FL 32548	
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: *Hubert R. Martin* **Hubert R. Martin** **033098** **950 243 6933**

CR2E037 (1097)