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Apr 17 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 700920 (2)

1. Corporation Name

FIRST BAPTIST CHURCH OF GULF BREEZE, INC.



Principal Place of Business

Mailing Address

555 FAIRPOINT DRIVE
GULF BREEZE FL 32561

555 FAIRPOINT DRIVE
GULF BREEZE FL 32561-4105

3. Date Incorporated or Qualified
05/05/1960

3a. Date of Last Report
04/10/1996

2. Principal Place of Business

2a. Mailing Address

21

25

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number
59-6018377

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

REGISTER, JOHN F.
2812 OAK RIDGE DR.
GULF BREEZE FL 32561

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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

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 D DELETE
NAME RENFROE, COLIN
STREET ADDRESS 422 SURREY DRIVE
CITY-ST-ZIP GULF BREEZE FL

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE D DELETE
NAME REGISTER, JOHN F. J.
STREET ADDRESS 2522 MEEK STREET
CITY-ST-ZIP GULF BREEZE FL

2.1 TITLE SD Change Addition
2.2 NAME Bill Smithey
2.3 STREET ADDRESS 1519 Baywoods Rd.
2.4 CITY-ST-ZIP Gulf Breeze, FL

TITLE PD DELETE
NAME CARTER, TOM
STREET ADDRESS 141 HIGHPOINT DRIVE
CITY-ST-ZIP GULF BREEZE FL

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE SD DELETE
NAME MCGRATHER, ROGER
STREET ADDRESS 2908 HARBOUR DRIVE
CITY-ST-ZIP NAVARRE FL

4.1 TITLE VPD Change Addition
4.2 NAME Pete Baker
4.3 STREET ADDRESS 2820 Oak Ridge
4.4 CITY-ST-ZIP Gulf Breeze FL

TITLE VPD DELETE
NAME WISE, FLOYD W
STREET ADDRESS 108 NORWICH DRIVE
CITY-ST-ZIP GULF BREEZE FL

5.1 TITLE D Change Addition
5.2 NAME Jerry Grimes
5.3 STREET ADDRESS 1604-A Greenbriar Pkwy
5.4 CITY-ST-ZIP Gulf Breeze FL

TITLE D DELETE
NAME SWINDELL, JOHN
STREET ADDRESS 331 ANDREW JACKSON TRAIL
CITY-ST-ZIP GULF BREEZE FL

6.1 TITLE Change 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 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:

Tom Carter

Signature Required

April 9, 1997 (904)432-1411

CR2E037 (9/96)