

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 # 700946 (7)

1. Corporation Name
BAYVISTA CHURCH OF CHRIST INC



Principal Place of Business: 5460 7TH STREET SOUTH ST PETERSBURG FL 33705
Mailing Address: 5460 7TH STREET SOUTH ST PETERSBURG FL 33705

3. Date Incorporated or Qualified: 05/12/1960
3a. Date of Last Report: 05/22/1995

21	2. Principal Place of Business	26	2a. Mailing Address	4.	FEI Number 59-2382217	Applied For	Not Applicable
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.	5.	Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required
23	City & State	28	City & State	6.	Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Zip	25	Country	29	Zip	30	Country
				8.	This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WARNOCK, FRED D.
5460 7TH ST. S.
853 69TH AVE. S.
ST. PETERSBURG FL 33705

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
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: _____ (NOTE: Registered Agent signature required when registering) _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SD WARNOCK, FRED D. <input type="checkbox"/> DELETE	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	5460 7TH ST. S.	12 NAME	
STREET ADDRESS	ST. PETERSBURG FL	13 STREET ADDRESS	
CITY-ST-ZIP		14 CITY-ST-ZIP	
TITLE	DP DUREN, L.W. <input type="checkbox"/> DELETE	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	142 - 58TH AVE SOUTH	22 NAME	
STREET ADDRESS	ST. PETERSBURG FL	23 STREET ADDRESS	
CITY-ST-ZIP		24 CITY-ST-ZIP	
TITLE	VD CAMPBELL, ALAN B. <input type="checkbox"/> DELETE	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	175 - 58TH AVE SOUTH	32 NAME	
STREET ADDRESS	ST. PETERSBURG FL	33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE	TD DUREN, DAVID <input type="checkbox"/> DELETE	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	4019 - 27TH AVE. N-	42 NAME	
STREET ADDRESS	ST. PETERSBURG FL	43 STREET ADDRESS	1200 - 11th St No
CITY-ST-ZIP		44 CITY-ST-ZIP	ST Pete 33705
TITLE	D LATELERS, MILTON C., SR. <input type="checkbox"/> DELETE	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1209 ALCAZAR WAY S	52 NAME	
STREET ADDRESS	ST PETERSBURG FL	53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	D MARTIN, JAMES <input checked="" type="checkbox"/> DELETE	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	4301 TUNA DR S	62 NAME	
STREET ADDRESS	ST. PETERSBURG FL	63 STREET ADDRESS	
CITY-ST-ZIP		64 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: *Fred D. Warnock, Secretary* Date: 2-25-96
 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: FRED D. WARNOCK SECRETARY District Phone #: (813) 866-0300

CR2E037 (12/95)