FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 MAY -1 PM 9:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 701112 (5)

1. Corporation Name
SUNRISE BOULEVARD BAPTIST CHURCH, INC.

Principal Place of Business	Mailing Address
4910 SUNRISE BLVD FT PIERCE FL 34982-1155	4910 SUNRISE BLVD FT PIERCE FL 34982-1155

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/22/1960
3a. Date of Last Report: 03/06/1994
4. FEI Number: 59-2171977 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

9. Name and Address of Current Registered Agent

BLAIR, LEONARD G
339 NOTLEM DR
FT. PIERCE FL 34982

10. Name and Address of New Registered Agent

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE	D	☒ Change ☐ Addition
NAME	SMITH, ROBERT	1.2 NAME	Henry Selmer	
STREET ADDRESS	1051 BRADLEY STREET	1.3 STREET ADDRESS	2629 Rainbow Drive	
CITY-ST-ZIP	FT. PIERCE FL	1.4 CITY-ST-ZIP	Ft. Pierce, FL 34981	
TITLE	V	2.1 TITLE		☐ Change ☐ Addition
NAME	BASS, JAMES	2.2 NAME		
STREET ADDRESS	601 ULRICH RD	2.3 STREET ADDRESS		
CITY-ST-ZIP	FT. PIERCE FL	2.4 CITY-ST-ZIP		
TITLE	S	3.1 TITLE		☐ Change ☐ Addition
NAME	WRIGHT, WANITA	3.2 NAME		
STREET ADDRESS	511 SOUTH 11TH STREET	3.3 STREET ADDRESS		
CITY-ST-ZIP	FORT PIERCE FL	3.4 CITY-ST-ZIP		
TITLE	P	4.1 TITLE		☐ Change ☐ Addition
NAME	BLAIR, LEONARD G.	4.2 NAME		
STREET ADDRESS	339 NOTLEM DRIVE	4.3 STREET ADDRESS		
CITY-ST-ZIP	FORT PIERCE FL	4.4 CITY-ST-ZIP		
TITLE	D	5.1 TITLE		☐ Change ☐ Addition
NAME	HOLTON, T. L., SR.	5.2 NAME		
STREET ADDRESS	910 BUCKEYE DRIVE	5.3 STREET ADDRESS		
CITY-ST-ZIP	FT. PIERCE FL	5.4 CITY-ST-ZIP		
TITLE	D	6.1 TITLE	D	☒ Change ☐ Addition
NAME	LEWIS, C. R.	6.2 NAME	Larry Randall Branch	
STREET ADDRESS	5015 STARR AVE	6.3 STREET ADDRESS	299 Easy Street	
CITY-ST-ZIP	FT. PIERCE FL	6.4 CITY-ST-ZIP	Ft. Pierce, FL 34982-3958	

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)(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: T. L. Holton, Sr. T.L. Holton, Sr. 4/25/95 407 464-2062
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

607084