

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 # 701112 (5)

1. Corporation Name

SUNRISE BOULEVARD BAPTIST CHURCH, INC.

Principal Place of Business

**4910 SUNRISE BLVD
FT PIERCE FL 34982-1155**

Mailing Address

**4910 SUNRISE BLVD
FT PIERCE FL 34982-1155**



3. Date Incorporated or Qualified
06/22/1960

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

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

James W. Bass

82

Street Address (P.O. Box Number is Not Acceptable)
801 Ulrich Road

83

84

City

Ft. Pierce,

FL

85 Zip Code
34982

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 **James W. Bass, Pres.**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

5-30-96

DATE

12. OFFICERS AND DIRECTORS

| | | |
|-----------------|-----------------------|--|
| TITLE | D | <input checked="" type="checkbox"/> DELETE |
| NAME | SELMER, HENRY | |
| STREET ADDRESS | 2629 RAINBOW DRIVE | |
| CITY - ST - ZIP | FT. PIERCE FL | |
| TITLE | V | <input checked="" type="checkbox"/> DELETE |
| NAME | BASS, JAMES | |
| STREET ADDRESS | 801 ULRICH RD | |
| CITY - ST - ZIP | FT. PIERCE FL | |
| TITLE | S | <input type="checkbox"/> DELETE |
| NAME | WRIGHT, WANITA | |
| STREET ADDRESS | 511 SOUTH 11TH STREET | |
| CITY - ST - ZIP | FORT PIERCE FL | |
| TITLE | P | <input checked="" type="checkbox"/> DELETE |
| NAME | BLAIR, LEONARD G. | |
| STREET ADDRESS | 339 NOTLEM DRIVE | |
| CITY - ST - ZIP | FORT PIERCE FL | |
| TITLE | D | <input type="checkbox"/> DELETE |
| NAME | HOLTON, T. L., SR. | |
| STREET ADDRESS | 910 BUCKEYE DRIVE | |
| CITY - ST - ZIP | FT. PIERCE FL | |
| TITLE | D | <input type="checkbox"/> DELETE |
| NAME | BRANCH, LARRY R | |
| STREET ADDRESS | 299 EASY STREET | |
| CITY - ST - ZIP | FT. PIERCE FL | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | | |
|---------------------|-------------------------|--|
| 1.1 TITLE | V | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME | Donald L. Pressley | |
| 1.3 STREET ADDRESS | 602 N.E. Helicon | |
| 1.4 CITY - ST - ZIP | Pt. St. Lucie, FL 34983 | |
| 2.1 TITLE | P | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME | James W. Bass | |
| 2.3 STREET ADDRESS | 801 Ulrich Road | |
| 2.4 CITY - ST - ZIP | Ft. Pierce, FL 34982 | |
| 3.1 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME | | |
| 3.3 STREET ADDRESS | | |
| 3.4 CITY - ST - ZIP | | |
| 4.1 TITLE | D | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME | Jennings W. Flint | |
| 4.3 STREET ADDRESS | 15 Temple Avenue | |
| 4.4 CITY - ST - ZIP | Ft. Pierce, FL 34982 | |
| 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 | | |

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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: **James W. Bass, James W. Bass**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-22-96

Date

407-464-2062

Daytime Phone #

CR2E037 (12/95)