

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

FILED

Mar 11 1996 8:00 am
Secretary of State

DOCUMENT # **702095** (1)

1. Corporation Name

**RIVERVIEW BAPTIST CHURCH OF JACKSONVILLE, FLORID
A, INC.**



Principal Place of Business

Mailing Address

**RIVERVIEW BAPTIST CHURCH
1941 BELVEDERE STREET
JACKSONVILLE FL 32208
US**

**RIVERVIEW BAPTIST CHURCH
1941 BELVEDERE ST.
JACKSONVILLE FL 32208
US**

3. Date Incorporated or Qualified

03/03/1961

3a. Date of Last Report

01/23/1995

4. FEI Number

59-6019815

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KNIGHT, DAVID
1941 BELVEDERE ST.
JACKSONVILLE FL 32208**

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 617.0502, Florida Statutes.

SIGNATURE

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

David Knight, Pastor

(NOTE: Registered Agent signature required when reinstating)

1-18-96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **P KNIGHT, DAVID**
STREET ADDRESS **1507 BASSETT ROAD**
CITY-ST-ZIP **JACKSONVILLE FL 32208**

TITLE ☐ DELETE
NAME **T ALLEN, JACK**
STREET ADDRESS **10513 DODD RD.**
CITY-ST-ZIP **JACKSONVILLE FL**

TITLE ☒ DELETE
NAME **T WETHERINGTON, GRADY**
STREET ADDRESS **4101 TROUT RIVER BLVD**
CITY-ST-ZIP **JACKSONVILLE FL**

TITLE ☐ DELETE
NAME **T YOUNGBLOOD, IMOGENE**
STREET ADDRESS **1737 BASSETT ROAD**
CITY-ST-ZIP **JACKSONVILLE FL**

TITLE ☐ DELETE
NAME **T MORTON, JEANETTE**
STREET ADDRESS **1452 BASSETT ROAD**
CITY-ST-ZIP **JACKSONVILLE FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

Treasurer ☒ Change ☐ Addition
Inez Carver
10710 Meadowlea Drive
Jacksonville, FL 32218

☐ Change ☐ Addition

☐ Change ☐ Addition
800001739258
-03/12/96--01011--001
*****70.00**

☐ Change ☐ Addition

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:

David Knight
Signature and typed or printed name of signing officer or director

David Knight, Pastor

1-18-96

Date

1-904-764-4509

Daytime Phone #

CR2E037 (12/95)