FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(5)

MAIN STREET BAPTIST CHURCH OF JACKSONVILLE, INC.

		.,							
Principal Place	e of Business	Mailing Address	Mailing Address					i medie Bioti din	11 01031 1001
23 WEST 8TH ST JACKSONVILLE FL 32206		23 WEST 8TH ST JACKSONVILLE FL 32200	23 WEST 8TH ST JACKSONVILLE FL 32208-9677						
						3. Date Incorporated or Qualified 06/29/1962	3a. Da	te of Last R 02/05/199	aport 16
2. Principal Pl 21	lace of Business	2a. Mailing Address				4. FEI Number 59-0662288		 	plied For of Applicable
Suite, Ap1. #, etc.		Suite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·			5. Certificate of Status Desired		\$8.75 A	
City & State	0	City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
Ζιρ 24	Country 25	Zip 29	30	intry] Yes [] No	199.032,
	9. Name and Address of Curr	ent Registered Agent	_			10. Name and Address of New Re	gletered	Agent	
				81	Name				
MAHON, LACY JR. 350 E. ADAMS STREET				82	Street Add	ress (P.O. Box Number is Not Acceptal	ole)		
JACKSOI	NVILLE FL 32202			83					
				84	City		FL		Code
office or r	egistered agent, or both, in the Sta	ite of Florida. Such change wa	as authorize	d by	the corpora	poration submits this statement for the partion's board of directors. I hereby acce	ourpose o	f changing it cointment as	s registered registered
•	m familiar with, and accept the obl	igations of, Section 617.0503,	Florida Sta	iuies	5.				
SIGNATURE .	Signature, typed or printed name of registered	agent and tille if applicable. (f	NOTE: Registere	o Age	nt signature requ	ired when reinstating)	DATE		
12.	OFFICERS A	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECTOR	IS IN 12
TITLE	1	DELETE	1.1 11	TLE				Change	☐ Addition
NAME	speir, edward e		1.2 N	AME					
STREET ADDRESS	23 W 8TH ST		1.3 \$	TREET	ADORESS				
CITY-ST-ZIP	JACKSONVILLE FL		1.4 0	ITY-S	T-ZIP				
TITLE	VD	☐ DELETE	2.1 TI	TLE				☐ Change	Addition
NAME	Stephens, Fred		2.2 N	AME	1				
STREET ADDRESS	23 W 8TH ST		2.3 \$	TREET	ADDRESS	*			
CITY-ST-ZIP	JACKSONVILLE, FL 00000		2.4(CITY-	ST-ZIP	<u> </u>			· · · · · · · · · · · · · · · · · · ·
TITLE	PD	DELETE	3.1 TI	ITLE				Change	Addition
NAME	DARDEN, BILL		3.2 N	AME					
STREET ADDRESS	23 W 8TH ST		3.3 S	TREET	ADDRESS				
CITY-ST-ZIP	JACKSONVILLE, FL 00000		3.4. 0	CITY-	ST-ZIP				
TITLE	\$	DELETE	4.1 T	ITLE				Change	Addition Addition
NAME	SPEIR, SONDRA		4.21	NAME					
STREET ADDRESS	23 W 8TH ST		· 4.3 \$	TREET	ADDRESS				
CITY-ST-ZIP	JACKSONVILLE, FL 00000		4.4 0	ITY-S	T-ZIP				 μ
TITLE		☐ DELETE	51 T	ITLE				Change	☐ Addition
NAME			5.2 N	IAME	1				
STREET ADDRESS			5.3 \$	TREET	ADDRESS				
CITY-ST-ZIP			5.40	ITY-S	ST-ZIP				— P—(· · · · · · · · · · · · · · · · · · ·
TITLE		☐ DELETE	6.1 T	ITLE				☐ Change	Addition
NAME			6.2 N	AME	Ì				
STREET ADDRESS			6.3 \$	TREET	ADDRESS				
PITY_S1_7/0			640	ary.s	IT. 7IP				

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: FRED H. STEPHENS Chairman of Deacons

FILED

Feb 03 1997 8:00am

Secretary of State

(904) 356-3038