

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 # 704988 (5)
1. Corporation Name
FIRST BAPTIST CHURCH OF BONITA SPRINGS, INC.



Principal Place of Business
**28440 MANGO DR.
BONITA SPRINGS FL 33923**

Mailing Address
**28440 MANGO DR.
BONITA SPRINGS FL 33923**

3. Date Incorporated or Qualified
11/13/1962

3a. Date of Last Report
05/31/1995

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	4. FEI Number 59-1085751	Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
		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

**WILDER, JAMES
9780 CAROLINA ST. S.E.
BONITA SPGS. FL 33923**

10. Name and Address of New Registered Agent

81 Name
Wilder, James

82 Street Address (P.O. Box Number is Not Acceptable)
4575 Key Largo Lane

83 City
Bonita Springs, FL 33923

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 617.0503, Florida Statutes.

SIGNATURE *James F. Wilder Jr.* **TREAS/DIR** **JAMES F. WILDER JR** **2-7-96**
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PT	<input type="checkbox"/> DELETE	1.1 TITLE TD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME HITT, DALE		2.1 NAME Wilder, Jim	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 26088 COUNTESS LN.		2.2 STREET ADDRESS 4575 Key Largo Lane	
CITY-ST-ZIP BONITA SPGS. FL		2.3 CITY-ST-ZIP Bonita Springs, FL 33923	
TITLE TD	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME WILDER, JIM		3.2 NAME	
STREET ADDRESS 9780 CAROLINA ST. S.E.		3.3 STREET ADDRESS	
CITY-ST-ZIP BONITA SPGS. FL		3.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME HARVARD, ERNEST		4.2 NAME	
STREET ADDRESS 27141 MORGAN RD		4.3 STREET ADDRESS	
CITY-ST-ZIP BONITA SPGS. FL 33923		4.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME SMITH, DARRYL		5.2 NAME	
STREET ADDRESS 9065 TANGELO BLVD		5.3 STREET ADDRESS	
CITY-ST-ZIP FT MYERS FL 33912		5.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME SMITH, DARRYL		6.2 NAME	
STREET ADDRESS 9065 TANGELO BLVD		6.3 STREET ADDRESS	
CITY-ST-ZIP FT MYERS FL 33912		6.4 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: *James F. Wilder Jr.* **TREAS/DIR.** **JAMES F. WILDER JR.** **947-6195**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
2-7-96 Date Daytime Phone #

CR2E037 (12/95)