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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Mar 03 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

422 FLEETWOOD DR

MARY ESTHER FL

705644

(3)

THE FIRST BAPTIST CHURCH, MARY ESTHER, FLORIDA INC.

Principal Place of Business Mailing Address 28 NORTH STREET 29 NORTH STREET P.O. BOX 184 P.O. BOX 184 MARY ESTHER FL 32569-0184 MARY ESTHER FL 32569 3. Date Incorporated or Qualified 05/22/1963 3a. Date of Last Report 01/29/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1696431 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 **Trust Fund Contribution** 28 Added to Fees Zip Country Country Zip This corporation has liability for intangible tax under s. 199.032, Florida Statutes
 Yes

No Yes Yes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **NISWANDER, CARL** 82 Street Address (P.O. Box Number is Not Acceptable) 336 KATHLEEN PLACE 83 FT. WALTON BEACH FL 32548 84 City Zip Code 85 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-hand 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** Signature, typed or printed name of registered agent and title if applicable DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)TITLE □ DELETE 1.1 TITLE Change Addition METZ, KARL NAME 1.2 NAME 513 POCAHONTAS DRIVE STREET ADDRESS 1.3 STREET ADDRESS FT. WALTON BEACH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP TOLE SD DELETE 2.1 TITLE Change Addition WENTWORTH, MARILYN NAME 2.2 NAME 241 S LORRAINE DRIVE STREET ADDRESS 2.3 STREET ADDRESS MARY ESTHER FL CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition NISWANDER, CARL NAME 3.2 NAME 336 KATHLEEN PLACE STREET ADDRESS 3.3 STREET ADDRESS FT WALTON BCH FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE PD 4 1 TITLE Change Addition NAME BALE, CURTIS 4. 2 NAME **620 STONEHENGE DRIVE** STREET ADDRESS 4.3 STREET ADDRESS MARY ESTHER FL CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE cn? Change Addition 5.1 TITLE REAVIS. WENDY NAME 5.2 NAME 133 NEWCASTLE CR. STREET ADDRESS 5.3 STREET ADDRESS FT. WALTON BEACH FL CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE VD 6.1 TITLE . Change Addition PENDER, JAMES NAME 6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP 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 controlled on the receiver of trustel empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if phanged, or in an attachment with an address.