## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

1. Corporation Name 707027

(9)

## TEMPLE BAPTIST CHURCH OF TITUSVILLE, FLORIDA, IN

Principal Place of Business Mailing Address

1400 N BS #1



TITUSVILLE F		TITUSVILLE FL 32796										
						3					of Last Report 1/25/1995	
· · · · ·	ace of Business	2a. Mailing Address			4	4. FEI Number				Applied For		
21		26					59-191150	6			Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc. 27			5	5. Certificate of Status Desired Seatus Desired Fee Required						
City & State	·	City & State			6	<ul> <li>Election Campaign</li> <li>Trust Fund Contrib</li> </ul>	-	S \$5.00 May Be Added to Fees				
Zφ	Country	Ζφ	Country				8. This corporation has liability for intangible tax under s. 199.032,					
24	9. Name and Address of Currer	29	30				Florida Statutes		Yes 🔽			
	g, Name and Address of Currer	n negistered Agent		81	Name	10	, Name and Addre	SS OT NEW HE	gistered	Agent		
CODOCI	I MEMORIA I		1									
1300 N I	L,WENDELL J		82 Street Add			Address (F	P.O. Box Number is N	Not Acceptable	e)			
	LE FL 32796		ŀ	83							-	
moorie	CE 1 E 32190									, .,		
				84	City				FL	85	Zip Code	
or register	to the provisions of Sections 617.0502 ed agent, or both, in the State of Flori th, and accept the obligations of, Soct	da. Such change was authorize	ed by the c	/e-n. orpc	amed co pration's	prporation board of c	submits this stateme directors. I hereby ac	nt for the purp cept the appoi	yose of cha	inging i registe	ts registered office red agent. I am	
SIGNATURE	Signature, typied or printed name of registered agent		FC F									
12.	OFFICERS AN		TE Registereo /	Agent	signature ri	equired when i	ADDITIONS/CHAN	GES TO OFFI	DATE OF DS AND	THE C	21009 IN 12	
TITLE	VD	DELETE	1.1 Iti	L€			TREATIONS OF THE	020 10 0111		Chan		
NAME	HOOPER, LARRY		1 2 NA	ME					•	_'		
STREET ADDRESS	7650HARVEY WAY		1.3 \$16	REET	ADDRES\$							
CITY+ST+ZIP	COCOA FL		1.4 CIT									
Title	PD	DELETE	2 1 717	LE					[	Chan	ge 🔲 Addition	
NAME	CORRELL, WENDELL J.		2 2 NAI	ME								
STREET ADDRESS	1300 N US 1		2 3 STF	REET	ADDRES\$							
CITY-ST-ZIP	TITUSVILLE FL		2 4 CI	TY-S	r - ZiP							
TITLE	VD	DELETE	3 1 117	LE					[	Chan	ge Addition	
NAME	SENTER, HAROLD		3 2 NA	ME								
STREET ADDRESS	3380 GRANTLINE RD				ADORESS							
CITY - ST - ZIP	MIMS FL	DELETE	3 4. CI		T-ZIP					70		
TITLE NAME		L'Intrest	4111						l	Chan	ge	
STREET ADDRESS			4 2 NA		ADDRESS							
CITY-ST-ZIP												
TITLE		DELETE	4 4 CIT		- 705				Г	Chan	ge Addition	
NAME		<u> </u>	5 2 NA						L		4 ( 1 / NO (10))	
STREET ADDRESS					ADDRESS							
CITY-ST-ZIP			5 4 CIT									
TITLE		DELETE	6 1 TIT						· · · · · · · · · · · · · · · · · · ·	Chan-	ge 🔲 Addition	
NAME			6 2 NA	ME					•	_	_	
STREET ADDRESS			6 3 STF	REET /	ADORESS							
CITY - ST - ZIP			6 4 CIT	Y-ST	- ZIP							
44 1 1 1 1		The state of the s			<del></del>							

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 directed effect 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 or Blo PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

SIGNATURE: \_

Wendell J. Correll President

Date Daytime Phone #

February 6

CR2E037 (12/95)