

FILE NOW: FILING FEE IS \$61.25

FILED

Jan 30 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 707027 (9) 1. Corporation Name TEMPLE BAPTIST CHURCH OF TITUSVILLE, FLORIDA, IN C.					
Principal Place of Business 1400 N U.S. #1 TITUSVILLE FL 32796			Mailing Address 1400 N U.S. #1 TITUSVILLE FL 32796		
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		3. Date Incorporated or Qualified 03/23/1964 4. FEI Number 59-1911506 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		7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No					
9. Name and Address of Current Registered Agent CORRELL, WENDELL J 1300 N US 1 TITUSVILLE FL 32796			10. Name and Address of New Registered Agent 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 617.1503, 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VD	☐ DELETE	1.1 TITLE	Secretary / Treasurer	☐ Change ☒ Addition
NAME	HOOPER, LARRY		1.2 NAME	Tara McMurphy	
STREET ADDRESS	7650 HARVEY WAY		1.3 STREET ADDRESS	1820 Old Dixie Hwy.	
CITY-ST-ZIP	COCOA FL		1.4 CITY-ST-ZIP	Titusville, FL 32796	
TITLE	PD	☐ DELETE	2.1 TITLE	Vice President	☐ Change ☒ Addition
NAME	CORRELL, WENDELL J.		2.2 NAME	LeRoy Eldridge	
STREET ADDRESS	1300 N US 1		2.3 STREET ADDRESS	4396 Pondapple	
CITY-ST-ZIP	TITUSVILLE FL		2.4 CITY-ST-ZIP	Titusville, FL 32796	
TITLE	VD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	SENER, HAROLD		3.2 NAME		
STREET ADDRESS	3380 GRANTLINE RD		3.3 STREET ADDRESS		
CITY-ST-ZIP	MIMS FL		3.4 CITY-ST-ZIP		
TITLE	Secretary	☐ DELETE	4.1 TITLE		☐ Change ☒ Addition
NAME	Tara McMurphy		4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

14. I 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:

TARA MCMURPHY

1-22-98

407-269-1133

CR2E037 (10/97)