

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

DOCUMENT # 707308 (3)

95 FEB -3 PM 1:33

1. Corporation Name  
NEW FELLOWSHIP BAPTIST CHURCH, INC.

Principal Place of Business Mailing Address  
1840 OLD DIXIE HWY 1840 OLD DIXIE HWY  
TITUSVILLE FL 32796 TITUSVILLE FL 32796

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified 05/18/1964	3a. Date of Last Report 05/01/1994
4. FBI Number 23-7410324	Applied For 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input checked="" type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24 Zip Country	29 Zip Country

9. Name and Address of Current Registered Agent

HANSON, JERRY R., SR.  
1840 OLD DIXIE HIGHWAY  
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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HANSON, JERRY R. SR.	1.2 NAME	
STREET ADDRESS	1840 OLD DIXIE HIGHWAY	1.3 STREET ADDRESS	
CITY - ST - ZIP	TITUSVILLE FL	1.4 CITY - ST - ZIP	
TITLE	ST	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALLEN, CARL	2.2 NAME	
STREET ADDRESS	3625 CARTER RD.	2.3 STREET ADDRESS	ST BRENDA KEBLEY
CITY - ST - ZIP	MIMS FL	2.4 CITY - ST - ZIP	2900 BRARWOOD LANE TITUSVILLE, FL. 32796
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BARFIELD, WILMER	3.2 NAME	
STREET ADDRESS	428 KEL AVENUE	3.3 STREET ADDRESS	
CITY - ST - ZIP	TITUSVILLE FL	3.4 CITY - ST - ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TYREE, EUGENE	4.2 NAME	
STREET ADDRESS	875 ALFORD	4.3 STREET ADDRESS	
CITY - ST - ZIP	TITUSVILLE FL	4.4 CITY - ST - ZIP	
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALLEN, JAMES	5.2 NAME	
STREET ADDRESS	2905 BRIAR WOOD LN.	5.3 STREET ADDRESS	
CITY - ST - ZIP	TITUSVILLE FL	5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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 110.07(3)(b), 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: Jerry R. Hanson Sr. JERRY R. HANSON SR. 1-20-95 907-269-0209  
DATE: \_\_\_\_\_ DAY: \_\_\_\_\_