

FILE NOW: FILING FEE IS \$61.25

FILED  
Jul 22 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # **708481** (7)  
1. Corporation Name  
**FIRST BAPTIST CHURCH OF BROOKSVILLE, FLORIDA**



Principal Place of Business <b>420 NORTH HOWELL POST OFFICE BOX 1630 BROOKSVILLE FL 34805-8630</b>	Mailing Address <b>PO BOX 1630 BROOKSVILLE FL 34805-1630 US</b>
---	--

3. Date Incorporated or Qualified <b>02/12/1965</b>	Applied For <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Not Applicable
4. FEI Number <b>59-0711168</b>	

2. Principal Place of Business <b>21</b> Suite, Apt. #, etc. <b>22</b> City & State <b>23</b> Zip <b>24</b> Country	2a. Mailing Address <b>25</b> Suite, Apt. #, etc. <b>26</b> City & State <b>27</b> Zip <b>28</b> Country
---	--

5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>BURNS, WINSTON 5055 CEDAR LANE BROOKSVILLE FL 34801</b>	
---	--

10. Name and Address of New Registered Agent <b>81</b> Name <b>EARL PATTERSON</b> <b>82</b> Street Address (P.O. Box Number is Not Acceptable) <b>9836 DOMINGO DRIVE</b> <b>83</b> <b>84</b> City <b>BROOKSVILLE</b> <b>FL</b> <b>85</b> Zip Code <b>34601</b>	
---	--

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 *Earl Patterson* **Earl Patterson Chairman Of Trustee's** **6/11/98**  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b> <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BLAKEMAN, CARROLL E</b>	1.2 NAME	
STREET ADDRESS	<b>9482 WALLIAN</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>BROOKSVILLE FL 34801</b>	1.4 CITY-ST-ZIP	
TITLE	<b>D</b> <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>ARICK, A. W</b>	2.2 NAME	<b>AARON WALKER</b>
STREET ADDRESS	<b>26341 OLD SPRING LAKE RD.</b>	2.3 STREET ADDRESS	<b>3485 SATURN ROAD</b>
CITY-ST-ZIP	<b>BROOKSVILLE FL 34801</b>	2.4 CITY-ST-ZIP	<b>BROOKSVILLE, FL 34609</b>
TITLE	<b>D</b> <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>KOON, DAVID</b>	3.2 NAME	<b>Glenn Wilcox</b>
STREET ADDRESS	<b>434 EDERINGTON DR.</b>	3.3 STREET ADDRESS	<b>4960 MOCKINGBIRD DRIVE</b>
CITY-ST-ZIP	<b>BROOKSVILLE FL 34801</b>	3.4 CITY-ST-ZIP	<b>RIDGE MANOR, FL 33525</b>
TITLE	<b>D</b> <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>FRAZIER, WALTER</b>	4.2 NAME	
STREET ADDRESS	<b>3 PINE ST.</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP	<b>BROOKSVILLE FL 34801</b>	4.4 CITY-ST-ZIP	
TITLE	<b>D</b> <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>GRUBBS, MURRAY</b>	5.2 NAME	
STREET ADDRESS	<b>23019 GRUBBS ROAD</b>	5.3 STREET ADDRESS	
CITY-ST-ZIP	<b>BROOKSVILLE FL 34801</b>	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	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 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 *Earl Patterson*

CP2E037 (10/97)