

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra D. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 709053 (3)

1. Corporation Name

DANIELS ROAD BAPTIST CHURCH, INC.

Principal Place of Business

Mailing Address

**5878 DANIELS ROAD S.E. R.R. 25
FORT MYERS FL 33912**

**5878 DANIELS ROAD S.E. R.R. 25
FORT MYERS FL 33912**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/31/1965

3a. Date of Last Report

01/31/1994

4. FEI Number

59-2350694

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

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. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒

**\$68.75 Supplemental
Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WEER, RALPH M
8 KIOWA DR
FT MYERS BCH FL 33931**

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

Ralph M. Weer

(NOTE: Registered Agent signature required when registering)

1-24-95

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	CD
NAME	BENEDICT, RICHARD
STREET ADDRESS	8164 GULL LANE
CITY - ST - ZIP	FORT MYERS FL
TITLE	TD
NAME	GOSTIGIAN, JAMES
STREET ADDRESS	6831 ST. EDMUNDS LOOP
CITY - ST - ZIP	FORT MYERS FL
TITLE	D
NAME	GALVIN, DAVID
STREET ADDRESS	4839 GLOUCESTER COURT
CITY - ST - ZIP	FORT MYERS FL
TITLE	TD
NAME	MERRILL, DAVID
STREET ADDRESS	1430 S.E. 18TH TERRACE
CITY - ST - ZIP	FT. MYERS FL
TITLE	P
NAME	WEER, RALPH M REV.
STREET ADDRESS	8 KIOWA DR
CITY - ST - ZIP	FT MYERS BCH FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☒ Addition
6.2 NAME	Hindal, Christopher L.
6.3 STREET ADDRESS	2436 Ivy Ave.
6.4 CITY - ST - ZIP	Fort Myers FL 33907

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 119.07(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:

Ralph M. Weer

Ralph M. Weer

1-24-95

813-481-2416

(Signature and typed or printed name of signing officer or director)

Date

Telephone #