

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 709145 (7)  
1. Corporation Name  
FIRST BAPTIST CHURCH OF CENTER HILL, INC.



Principal Place of Business: P.O. BOX 151, SOUTH VIRGINIA AVE, CENTER HILL FL 33514  
Mailing Address: P.O. BOX 151, SOUTH VIRGINIA AVE, CENTER HILL FL 33514

3. Date Incorporated or Qualified: 06/15/1965  
3a. Date of Last Report: 05/01/1995  
4. FEI Number: 59-1975778  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business (21) Suite, Apt. #, etc. (22) City & State (23) Zip (24) Country (25)  
2a. Mailing Address (26) Suite, Apt. #, etc. (27) City & State (28) Zip (29) Country (30)

9. Name and Address of Current Registered Agent: BRANCH, BILL, PINE STREET, CENTER HILL FL 33514  
10. Name and Address of New Registered Agent: 81 Name, 82 Street Address (P.O. Box Number is Not Acceptable), 83, 84 City, 85 Zip Code (FL)

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: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: ST	BRANCH, SUNNI VIRGINIA AVE & PINE ST. CENTER HILL FL	1.1 TITLE: <input type="checkbox"/> DELETE	1.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: S	BRANNEN, GERRIE MAGNOLIA AVE CENTER HILL FL	1.2 NAME: <input checked="" type="checkbox"/> DELETE	2.1 TITLE: <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: P	HIGGINS, ROBERT P.O. BOX 151 N/A CENTER HILL FL	1.3 STREET ADDRESS: <input type="checkbox"/> DELETE	2.2 NAME: VP BRANNEN, RAY MAGNOLIA AVE, CENTER HILL, FL
CITY-ST-ZIP: D	CARTER, A J HWY 48 CENTER HILL FL	1.4 CITY-ST-ZIP: <input type="checkbox"/> DELETE	2.3 STREET ADDRESS: <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: T	BRANNEN, GERRIE MAGNOLIA AVE CENTER HILL FL	2.1 TITLE: <input checked="" type="checkbox"/> DELETE	2.4 CITY-ST-ZIP: 400001787994 -04/22/96--01015--004 ***\$61.25
NAME: D	HESS, GARNETT HWY 48 CENTER HILL FL	2.2 NAME: <input type="checkbox"/> DELETE	2.5 TITLE: T CRAIG, BARBARA ORANGE AVE CENTER HILL, FL
STREET ADDRESS: T		2.3 STREET ADDRESS: <input type="checkbox"/> DELETE	2.6 NAME: <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
CITY-ST-ZIP: D		2.4 CITY-ST-ZIP: <input type="checkbox"/> DELETE	2.7 STREET ADDRESS: <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: D		2.5 TITLE: <input type="checkbox"/> DELETE	2.8 CITY-ST-ZIP: 4-19-96
NAME: D		2.6 NAME: <input type="checkbox"/> DELETE	
STREET ADDRESS: D		2.7 STREET ADDRESS: <input type="checkbox"/> DELETE	
CITY-ST-ZIP: D		2.8 CITY-ST-ZIP: <input type="checkbox"/> DELETE	

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)(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 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: *Robert Higgins* Robert Higgins, P (352) 793-2119  
Date: April 15, 1996 Daytime Phone #

CR2E037 (12/95)