


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED
Aug 21 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **710473** (0)
1. Corporation Name
FIRST BAPTIST CHURCH OF LARGO, FLORIDA, INC.

Principal Place of Business 801 SEMINOLE BLVD LARGO FL 34640	Mailing Address 801 SEMINOLE BLVD LARGO FL 34640
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/07/1966		3a. Date of Last Report 03/07/1996	
4. FEI Number 59-0774181		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	
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			

2. Principal Place of Business 21 801 Seminole Blvd. Suite, Apt. #, etc. 22 City & State 23 Largo, FL Zip 24 33770	2a. Mailing Address 26 801 Seminole Blvd. Suite, Apt. #, etc. 27 City & State 28 Largo, FL Zip 29 33770	Country 30 Pinellas
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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ANDREWS, WARREN
100 BLUFF VIEW DR. #118
BELLEAIR BLUFFS FL 34640**

81 Name
Milor, Glenda
82 Street Address (P.O. Box Number is Not Acceptable)
12001 85th St. North
83
84 City
Largo
85 Zip Code
FL 33773

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 *Glenda Milor* *Glenda Milor, Secretary* *8/10/97*
(NOTE: Registered Agent Signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LAURANCE, PHIL 1824 OAK PARK DRIVE N CLEARWATER FL 34624 <input checked="" type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	D Butler, Kelly 1479 Hunt Lane Clearwater, FL 33764 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ANDREWS, WARREN 100 BLUFF VIEW DR. #118 BELLEAIR BLUFFS FL 34640 <input checked="" type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	VD Burrell, Vic 13128 Cimarron Circle N. Largo, FL 33774 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BOX, ED 10265 ULMERTON RD., #234 LARGO FL <input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	S Milor, Glenda 12001 85th St. North Largo, FL 33773 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CROCKETT, LINDA 453 HARBOR DR. N. INDIAN ROCKS BEACH FL 34635 <input checked="" type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOCKWOOD, JONATHAN 10498 VALENCIA ROAD SEMINOLE FL <input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	PD Lockwood, Jonathan 10498 Valencia Road Seminole, FL 33772 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EZELL, SHELBY 900 S KEENE ROAD CLEARWATER FL <input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do 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 *Jonathan Lockwood* *8/11/97* *813-302-7307*

CR2E037 (4/97)