

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY -1 AM 8:58

DOCUMENT # 711632 (0)

1. Corporation Name
FIRST BAPTIST CHURCH, INCORPORATED, OF CHIEFLAND, FLORIDA

Principal Place of Business: YOUNG BLVD, P O BOX 307, CHIEFLAND FL 32626
Mailing Address: YOUNG BLVD, P O BOX 307, CHIEFLAND FL 32626

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/17/1966	3a. Date of Last Report 02/25/1994
4. FEI Number 59-1776911	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$6.75 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	

21. Principal Place of Business	2a. Mailing Address PO Box 2270
22. Suite, Apt. #, etc. PO Box 2270	27. Suite, Apt. #, etc.
23. City & State	28. City & State
24. Zip	25. Country
29. Zip	30. Country

g. Name and Address of Current Registered Agent BEAUCHAMP, W.O. JR. LEVY COUNTY ROAD #345 CHIEFLAND FL 32826				10. Name and Address of New Registered Agent			
81. Name				85. Zip Code FL			
82. Street Address (P O. Box Number is Not Acceptable)				84. City			
83.							

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 re-registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: D	BYRD, GRIFFIN 104 NE 2ND STREET CHIEFLAND, FL 00000	11 TITLE: D	Tom Brown 1117 NW 17 Ave Chiefland, FL 32626
TITLE: D	KING, JIM 415 N. MAIN ST. CO RD 341 CHIEFLAND, FL 00000	21 TITLE: D	Ken Cross PO Box 1443 N/A Chiefland, FL 32626
TITLE: D	BEAUCHAMP, LUTHER RT 3 BOX 960 N/A CHIEFLAND, FL 00000	31 TITLE: D	Luther Beauchamp 11090 NW 86 Court Chiefland, FL 32626
TITLE: T	BEAUCHAMP, VIRGINIA ROAD 129 CHIEFLAND, FL 00000	41 TITLE: Beverly Lowe	6460 NW 115 Street Chiefland, FL 32626
TITLE:		51 TITLE:	
TITLE:		61 TITLE:	
TITLE:		71 TITLE:	

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: Beverly Lowe Beverly Lowe 4-27-95 904-493-1481
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR Date Telephone