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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 723651 (6)

1. Corporation Name

FIRST BAPTIST CHURCH OF SHADY HILLS, INC.

Principal Place of Business	Mailing Address
16902 SHADY HILLS RD P.O. BOX 11487 SPRING HILL FL 34610-0487	16902 SHADY HILLS RD P.O. BOX 11487 SPRING HILL FL 34610-0487

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/12/1972	3a. Date of Last Report 03/02/1994
4. FEI Number 59-2022225	Applied For Not Applicable
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	

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FRENGER, JOHN W
18250 GREENSBORO ST
SPRING HILL FL 34610

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DT	1.1 TITLE	☐ Change ☐ Addition
NAME	MARTIN, ARTHUR	1.2 NAME	
STREET ADDRESS	13905 HUDSON AVAE	1.3 STREET ADDRESS	
CITY- ST- ZIP	HUDSON FL	1.4 CITY- ST- ZIP	
TITLE	S	2.1 TITLE	☐ Change ☐ Addition
NAME	GIGNAC, JACQUELINE	2.2 NAME	
STREET ADDRESS	14905 PAULINE DRIVE	2.3 STREET ADDRESS	
CITY- ST- ZIP	HUDSON FL	2.4 CITY- ST- ZIP	
TITLE	DT	3.1 TITLE	☐ Change ☐ Addition
NAME	GIGNAC, GEORGE	3.2 NAME	
STREET ADDRESS	14904 PAULINE DR.	3.3 STREET ADDRESS	
CITY- ST- ZIP	HUDSON FL	3.4 CITY- ST- ZIP	
TITLE	CDT	4.1 TITLE	☐ Change ☐ Addition
NAME	FRENGER, JOHN W	4.2 NAME	
STREET ADDRESS	18250 GREENSBORO ST	4.3 STREET ADDRESS	
CITY- ST- ZIP	SPRING HILL FL	4.4 CITY- ST- ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY- ST- ZIP		5.4 CITY- ST- ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY- ST- ZIP		6.4 CITY- ST- ZIP	

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 110.07(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: John W. Frenger

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-31-95

813-856-0648

Date

Typed Name