

FILE NOW: FILING FEE IS \$61.25

FILED  
Mar 11 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 723781 (1)**  
1. Corporation Name  
**FIRST BAPTIST CHURCH OF DELTONA, INC**



Principal Place of Business <b>1200 PROVIDENCE BLVD. DELTONA FL 32725-7898 US</b>	Mailing Address <b>1200 PROVIDENCE BLVD. DELTONA FL 32725-7898 US</b>
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3. Date Incorporated or Qualified <b>06/30/1972</b>	
4. FEI Number <b>59-1416972</b>	Applied For <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent  
**PALMER, DONALD  
2334 FAIRGREN AVE  
DELTONA FL 32738**

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: *Donald E. Palmer* (NOTE: Registered Agent signature required when reinstating) DATE: **2-23-98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	T <b>SHANK, TIM</b> 1782 HARBINGER TERR DELTONA FL	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SHANK, TIM</b>	1.2 NAME	
STREET ADDRESS	1782 HARBINGER TERR	1.3 STREET ADDRESS	
CITY-ST-ZIP	DELTONA FL	1.4 CITY-ST-ZIP	
TITLE	D <b>HARMAN, SAM</b> 2838 ARRENDONDA DR DELTONA FL	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>HARMAN, SAM</b>	2.2 NAME	<b>D. COLE, GARY W</b>
STREET ADDRESS	2838 ARRENDONDA DR	2.3 STREET ADDRESS	1116 BATON DRIVE
CITY-ST-ZIP	DELTONA FL	2.4 CITY-ST-ZIP	DELTONA, FL 32725
TITLE	D <b>RUSH, MICHAEL</b> 1072 ARRON DR DELTONA, FL 00000	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>RUSH, MICHAEL</b>	3.2 NAME	
STREET ADDRESS	1072 ARRON DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	DELTONA, FL 00000	3.4 CITY-ST-ZIP	
TITLE	D <b>PRESCOTT, CHARLES R</b> 645 HYMAN DR DEBARY FL	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>PRESCOTT, CHARLES R</b>	4.2 NAME	
STREET ADDRESS	645 HYMAN DR	4.3 STREET ADDRESS	
CITY-ST-ZIP	DEBARY FL	4.4 CITY-ST-ZIP	
TITLE	D <b>SCHRIMSCHER, FERREL W</b> 1311 WEST HARTLEY CIR. DELTONA FL	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SCHRIMSCHER, FERREL W</b>	5.2 NAME	
STREET ADDRESS	1311 WEST HARTLEY CIR.	5.3 STREET ADDRESS	
CITY-ST-ZIP	DELTONA FL	5.4 CITY-ST-ZIP	
TITLE	P <b>PALMER, DONALD</b> 2334 FAIRGREN AVE. DELTONA FL	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>PALMER, DONALD</b>	6.2 NAME	
STREET ADDRESS	2334 FAIRGREN AVE.	6.3 STREET ADDRESS	
CITY-ST-ZIP	DELTONA FL	6.4 CITY-ST-ZIP	

14. I 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: *Donald E. Palmer* 2-23-98 (904) 789-3810

CFR2007 (10/97)