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Jun 04 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT **1998**

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

DOCUMENT # **725481** **(6)**

1. Corporation Name
HENDRICKS AVENUE BAPTIST CHURCH

Principal Place of Business	Mailing Address
4001 HENDRICKS AVENUE JACKSONVILLE FL 32207	4001 HENDRICKS AVENUE JACKSONVILLE FL 32207

3. Date Incorporated or Qualified: 01/23/1973

4. FEI Number: 59-0711173 ☐ Applied For ☐ Not Applicable

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

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. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No Exempt

9. Name and Address of Current Registered Agent

SNELL, JACK A
4001 HENDRICKS AVENUE
JACKSONVILLE FL 32207

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

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 _____ DATE
Signature, typed or printed name, of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	FELTON, CARLE A		1.2 NAME		
STREET ADDRESS	3208 BEAUCLERC ROAD		1.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	PARKER, SUZANNE		2.2 NAME		
STREET ADDRESS	721 OLD GROVE MANOR		2.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		2.4 CITY-ST-ZIP		
TITLE	D	☒ DELETE	3.1 TITLE	D	☒ Change ☐ Addition
NAME	SMITH, STEPHEN JR		3.2 NAME	Elizabeth A. Senterfitt	
STREET ADDRESS	2935 FOREST CIRCLE		3.3 STREET ADDRESS	822 Acapulco Road	
CITY-ST-ZIP	JACKSONVILLE FL		3.4 CITY-ST-ZIP	Jacksonville FL 32216	
TITLE	P	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	SNELL, JACK A.		4.2 NAME		
STREET ADDRESS	4001 HENDRICKS AVE.		4.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		4.4 CITY-ST-ZIP		
TITLE	S	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	FAUSS, CAROLE C.		5.2 NAME		
STREET ADDRESS	2470 CASTELLON DR N		5.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		5.4 CITY-ST-ZIP		
TITLE	T	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	MITCHELL, JOHN A III		6.2 NAME	300001555383	
STREET ADDRESS	10110 GOLF CLUB DRIVE		6.3 STREET ADDRESS	-06/09/98- 01094--025	
CITY-ST-ZIP	JACKSONVILLE FL		6.4 CITY-ST-ZIP	***61.25	

CR2E037 (10/97)

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: Jack A. Snell 4-23-98