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Apr 15 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 725762 (9)
 1. Corporation Name
WEST SIDE BAPTIST CHURCH OF WEST PALM BEACH, INC

Principal Place of Business 200 ROYAL PALM BCH BLVD ROYAL PALM BCH FL 33411 US	Mailing Address 200 ROYAL PALM BCH BLVD ROYAL PALM BCH FL 33411 US
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country
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3. Date Incorporated or Qualified 03/09/1973
4. FEI Number 59-2221534
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
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input 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 type="checkbox"/> No

9. Name and Address of Current Registered Agent
STEPHEN, LAMERSON
3193 FROST RD
WEST PALM BCH FL 33406

10. Name and Address of New Registered Agent
 81 Name **Larry Myers**
 82 Street Address (P.O. Box Number is Not Acceptable)
5710 Coconut Rd.
 83
 84 City **West Palm Beach** FL 85 Zip Code **33413**

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 *Larry Myers* DATE **4-1-98**
 (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	T	1.1 TITLE
NAME	STEPHEN, LAMERSON	1.2 NAME
STREET ADDRESS	3193 FROST RD	1.3 STREET ADDRESS
CITY-ST-ZIP	WEST PALM BCH FL	1.4 CITY-ST-ZIP
TITLE	T	2.1 TITLE
NAME	LARRY MYERS	2.2 NAME
STREET ADDRESS	5710 COCONUT RD	2.3 STREET ADDRESS
CITY-ST-ZIP	WEST PALM BCH FL	2.4 CITY-ST-ZIP
TITLE	D	3.1 TITLE
NAME	PREVETTE, BILL	3.2 NAME
STREET ADDRESS	P.O. BOX 1312 N/A	3.3 STREET ADDRESS
CITY-ST-ZIP	WEST PALM BEACH FL 33402-1312	3.4 CITY-ST-ZIP
TITLE	D	4.1 TITLE
NAME	LUFFMAN, TONY	4.2 NAME
STREET ADDRESS	9059 BANQUET WAY	4.3 STREET ADDRESS
CITY-ST-ZIP	LAKE WORTH FL	4.4 CITY-ST-ZIP
TITLE	D	5.1 TITLE
NAME	CLYDE TINDALE	5.2 NAME
STREET ADDRESS	390 67TH ST	5.3 STREET ADDRESS
CITY-ST-ZIP	WEST PALM BCH FL	5.4 CITY-ST-ZIP
TITLE		6.1 TITLE
NAME		6.2 NAME
STREET ADDRESS		6.3 STREET ADDRESS
CITY-ST-ZIP		6.4 CITY-ST-ZIP

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Trustee
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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: *Larry Myers* DATE **4-1-98**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/97)