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May 14 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 727102 (6)

1. Corporation Name
BRENTWOOD ASSEMBLY OF GOD, INC.

Principal Place of Business Mailing Address
4901 NORTH PALAFOX HIGHWAY 4901 NORTH PALAFOX HIGHWAY
P O BOX 8179 P O BOX 8179
PENSACOLA FL 32505 PENSACOLA FL 32505-0179



3. Date Incorporated or Qualified 08/06/1973 3a. Date of Last Report 05/01/1996
4. FEI Number 59-2276681 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
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 Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

VERNON WILBOURN
212 TOPEKA ROAD
PENSACOLA FL 32514

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition

TITLE D
NAME GORDON MCGRAW
STREET ADDRESS 11 EDGEWATER DRIVE
CITY-ST-ZIP PENSACOLA FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE P
NAME SHUMWAY, W. DEAN
STREET ADDRESS 8026 THISTLEDOWN DRIVE
CITY-ST-ZIP PENSACOLA FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE D DELETE
NAME VERNON WILBOURN
STREET ADDRESS 212 TOPEKA ROAD
CITY-ST-ZIP PENSACOLA FL

3.1 TITLE D Change Addition
3.2 NAME Tom Welch
3.3 STREET ADDRESS 5750 Frank Reeder Road
3.4 CITY-ST-ZIP Pensacola, Fl. 32526

TITLE D DELETE
NAME SMITH, CHARLES
STREET ADDRESS 130 HANCOCK LANE
CITY-ST-ZIP PENSACOLA FL

4.1 TITLE D Change Addition
4.2 NAME Mike Caro
4.3 STREET ADDRESS 1166 Hwy. 196
4.4 CITY-ST-ZIP Molino, Fl. 32577-5257

TITLE D DELETE
NAME HUDSON, DAVID
STREET ADDRESS 6790 COMMUNITY DR
CITY-ST-ZIP PENSACOLA FL 32526

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE D DELETE
NAME NEEL, EDWARD
STREET ADDRESS 7641 NORTHPOINTE DRIVE
CITY-ST-ZIP PENSACOLA FL

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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, changed, or on an attachment with an address.

CF2E037 (9/96)