

FILE NOW: FILING FEE IS \$61.25

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Feb 24 1998 8:00am  
Secretary of State

|                                                          |                                                                                   |                                                                                                           |
|----------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| NONPROFIT<br>CORPORATION<br>ANNUAL REPORT<br><b>1998</b> |  | FLORIDA DEPARTMENT OF STATE<br><b>Sandra B. Mortham</b><br>Secretary of State<br>DIVISION OF CORPORATIONS |
|----------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|

DOCUMENT # **728125** (6)

1. Corporation Name

**CEDAR HILLS BAPTIST CHURCH, INC.**

Principal Place of Business

Mailing Address

**4200 JAMMES RD.  
JACKSONVILLE FL 32210-7251**

**4200 JAMMES RD.  
JACKSONVILLE FL 32210-7251**

3. Date Incorporated or Qualified

**11/27/1973**

4. FEI Number

**59-0905226**

Applied For

Not Applicable

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

**BLACKBURN, A.B. JR.  
904 AMERICAN HERITAGE LIFE BLDG.,  
JACKSONVILLE FL**

**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

TITLE **S** ☐ DELETE

NAME **CHERRY, FRANCES**  
STREET ADDRESS **6304 SOLANDRA DR.**  
CITY-ST-ZIP **JAX, FL 00000**

TITLE **D** ☐ DELETE

NAME **MIZELLE, AUDREY**  
STREET ADDRESS **5400 LAMOYA AVE UNIT 1**  
CITY-ST-ZIP **JAX, FL 00000**

TITLE **PD** ☐ DELETE

NAME **WEBER, WILLIAM**  
STREET ADDRESS **3737 BRAMBLE ROAD**  
CITY-ST-ZIP **JACKSONVILLE FL**

TITLE **DTR** ☒ DELETE

NAME **FENLEY, WALTER**  
STREET ADDRESS **6309 GRAVES STREET**  
CITY-ST-ZIP **JACKSONVILLE FL**

TITLE **DR** ☐ DELETE

NAME **MCGRIFF, LORRIANE**  
STREET ADDRESS **4539 ARTHUR DURHAM DR**  
CITY-ST-ZIP **JACKSONVILLE FL**

TITLE **T** ☐ DELETE

NAME **JOHN WARE**  
STREET ADDRESS **4812 PALMER AVENUE**  
CITY-ST-ZIP **JACKSONVILLE FL**

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **P/D** ☐ Change ☒ Addition

1.2 NAME **Newton, Joseph R.**

1.3 STREET ADDRESS **4152 Jammes Rd.**

1.4 CITY-ST-ZIP **Jacksonville FL 32210**

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE **D** ☒ Change ☐ Addition

3.2 NAME **Weber, William**

3.3 STREET ADDRESS **3737 Bramble Road**

3.4 CITY-ST-ZIP **Jacksonville FL 32210**

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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: *Frances Cherry*

*2/16/98*

*(904) 771-1145*

CR25037 (10/97)