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FILED

May 01 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 729322 (8)

1. Corporation Name

FAITH BIBLE CHURCH OF CLEARWATER, INC.

Principal Place of Business

2177 N E COACHMAN RD
CLEARWATER FL 34625

Mailing Address

2177 N E COACHMAN RD
CLEARWATER FL 34625-2616

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

04/11/1974

3a. Date of Last Report

04/24/1996

4. FEI Number

59-1520088

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐

Yes

☐

No

9. Name and Address of Current Registered Agent

MCMASTER PAUL D
1750 CARDINAL DR
CLEARWATER FL 34625

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

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 PD BILS, STEPHEN H. ☒ DELETENAME
STREET ADDRESS 904 WELLINGTON DR.
CITY-ST-ZIP CLEARWATER FLTITLE VD GRANT, SCOTT A ☐ DELETENAME
STREET ADDRESS 831 BERKLEY PLACE
CITY-ST-ZIP CLEARWATER FLTITLE TSD MCMASTER, PAUL D ☐ DELETENAME
STREET ADDRESS 1750 CARDINAL DR
CITY-ST-ZIP CLEARWATER FLTITLE ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP2.1 TITLE PD ☒ Change ☐ Addition2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP3.1 TITLE SD ☒ Change ☐ Addition3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP4.1 TITLE VD ☐ Change ☒ Addition4.2 NAME Robert Frazier
4.3 STREET ADDRESS 486 Helen Drive
4.4 CITY-ST-ZIP Dunedin FL5.1 TITLE TD ☐ Change ☒ Addition5.2 NAME Nancy Rent
5.3 STREET ADDRESS 1148 Granada Street
5.4 CITY-ST-ZIP Clearwater FL6.1 TITLE ☐ Change ☐ Addition6.2 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 if changed, or on an attachment with an address.

SIGNATURE:

Paul D. McMaster

4/23/97

(813) 442-9431

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0067738

CR2E037 (9/96)