

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 733070 (7)
1. Corporation Name
FIRST BAPTIST CHURCH OF LISBON, INC.



Principal Place of Business
FIRST BAPTIST CHURCH OF LISBON
36303 EMERALDA AVE
LEESBURG FL 34788
US

Mailing Address
36303 EMERALDA AVE
14550 US HWY 441
LEESBURG FL 34788
US

3. Date Incorporated or Qualified 06/16/1975
3a. Date of Last Report 06/05/1995

2. Principal Place of Business
21 First Baptist Church of Lisbon
Suite, Apt. #, etc.
22 36303 Emerald Ave
City & State
23 Leesburg, FLA.
Zip
24 34788
Country
25 Lake
26 36303 Emerald Ave
City & State
27 Leesburg, FLA.
Zip
28 34788
Country
29 Lake
30 Lake

4. FEI Number 59-2387174
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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent
81 Name Roy C. Walls
82 Street Address (P.O. Box Number is Not Acceptable) 10547 Timbergate Rd-Box 11
83 Leesburg, Florida
84 City
85 Zip Code FL 34788

REID, JACK
12120 LAKEVIEW DR
LEESBURG FL 34788

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 Roy C. Walls Roy C. WALLS - Roy C. walls
Signature of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)
6-12-96
DATE

12. OFFICERS AND DIRECTORS
TITLE P
NAME REID, JACK ☒ DELETE
STREET ADDRESS 12120 LAKEVIEW DRIVE
CITY-ST-ZIP LEESBURG FL
TITLE V
NAME STALER, BILLIE ☐ DELETE
STREET ADDRESS 35316 LAKE BRADLY DR
CITY-ST-ZIP LEESBURG FL
TITLE D
NAME BLAZEDALE, RUTH ☐ DELETE
STREET ADDRESS 547 LOCK ROADT.
CITY-ST-ZIP LEESBURG FL
TITLE D
NAME STALER, CHESTER ☐ DELETE
STREET ADDRESS 35316 LAKE BRADLY DRIVE
CITY-ST-ZIP LEESBURG FL
TITLE D
NAME STEELE, IMOGENE ☐ DELETE
STREET ADDRESS 35918 GOOSE CREEK ROAD
CITY-ST-ZIP LEESBURG FL
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE P
1.2 NAME Roy C. Walls ☐ Change ☐ Addition
1.3 STREET ADDRESS 10547 Timbergate Rd-Box 11
1.4 CITY-ST-ZIP Leesburg, FLA. 34788 ☐ Change ☐ Addition
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further 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: Roy C. Walls
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
4-28-96 352-787-7359
Date Daytime Phone

CR2E037 (12/95)