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Mar 10 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 733314 (9)

1. Corporation Name

ROSEMONT BAPTIST CHURCH OF NICEVILLE, FLORIDA, INCORPORATED

Principal Place of Business

27TH & PINE STREETS
P.O. DRAWER 160
NICEVILLE FL 32588-0160

Mailing Address

27TH & PINE STREETS
P.O. DRAWER 160
NICEVILLE FL 32588-01603. Date Incorporated or Qualified
07/16/19753a. Date of Last Report
04/29/19964. FEI Number
59-1572457Applied For
Not Applicable5. 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

2. Principal Place of Business

21 Suite, Apt #, etc.

22 City & State

23 Zip Country

24 25 29 30

2a. Mailing Address

26 Suite, Apt #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

BARFIELD THOMAS A
1469 CYPRESS ST
NICEVILLE FL 32578

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
NAME BARFIELD THOMAS A
STREET ADDRESS 1469 CYPRESS ST
CITY-ST-ZIP NICEVILLE FL
☐ DELETETITLE VD
NAME KEARLEY NEAL
STREET ADDRESS 4082 ROCKY DR
CITY-ST-ZIP NICEVILLE FL
☐ DELETETITLE D
NAME HONDEL GEORGE
STREET ADDRESS 1504 28TH ST
CITY-ST-ZIP NICEVILLE FL
☐ DELETETITLE D
NAME REEVES, ROY F
STREET ADDRESS 1501 23RD ST.
CITY-ST-ZIP NICEVILLE FL 32578
☐ DELETETITLE ST
NAME HERNDON, WILLIAM H
STREET ADDRESS 718 ELM ST.
CITY-ST-ZIP NICEVILLE FL 32578
☐ DELETETITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

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 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: Thomas A. Barfield
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date 12 JAN 97
Daytime Phone # 0074906

CR2E037 (9/96)