


FILE NOW: FILING FEE IS \$61.25

FILED
May 05, 1999 8:00 am
Secretary of State

05-05-1999 90115 039 ****61.25

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| NONPROFIT CORPORATION ANNUAL REPORT 1999 | |  | | FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS | |
| DOCUMENT # 733857 | | | | | |
| 1. Corporation Name TRINITY BAPTIST CHURCH OF PENSACOLA, INCORPORATE D | | | | | |
| Principal Place of Business TRINITY BAPT CHURCH 1499 CHEMSTRAND RD CANTONMENT FL 32533 US | | | Mailing Address 8550 REDWING DRIVE PENSACOLA FL 32534 | | |



| | | | | | |
|---|--|------------------------|--|--|--|
| 2. Principal Place of Business | | 2a. Mailing Address | | 3. Date Incorporated or Qualified | |
| 21 Suite, Apt. #, etc. | | 26 1499 Chemstrand Rd | | 09/18/1975 | |
| 22 City & State | | 27 Suite, Apt. #, etc. | | 4. FEI Number | |
| 23 Zip | | 28 Cantonment, FL | | 59-2354196 | |
| 24 Country | | 29 32533 | | 30 U.S. | |
| 9. Name and Address of Current Registered Agent | | | | 10. Name and Address of New Registered Agent | |

HUNT, HAROLD B AR
 8550 REDWING DRIVE
 PENSACOLA FL 32534

| | |
|---|-------------|
| 81 Name | 85 Zip Code |
| 82 Street Address (P.O. Box Number is Not Acceptable) | |
| 83 | |
| 84 City | FL |

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 David H. Ivey (DAVID H. Ivey) DATE 4-11-99

(NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|---------------------------|---|--------------------------|
| TITLE | D | 1.1 TITLE | D |
| NAME | IVEY, DAVID | 1.2 NAME | Godwin, Jane |
| STREET ADDRESS | 9508 SANDPIPER STREET | 1.3 STREET ADDRESS | 401 Deerfoot Lane |
| CITY-ST-ZIP | PENSACOLA, FL 0 | 1.4 CITY-ST-ZIP | Cantonment, FL 32533 |
| TITLE | PD | 2.1 TITLE | PD |
| NAME | HUNT, JESSE J. | 2.2 NAME | Barrett Cutshaw, Darrell |
| STREET ADDRESS | 8731 REDWING DR | 2.3 STREET ADDRESS | 8105 Westbourne |
| CITY-ST-ZIP | PENSACOLA, FL 00000 32534 | 2.4 CITY-ST-ZIP | Pensacola, FL 32506 |
| TITLE | PD | 3.1 TITLE | |
| NAME | GODWIN, JANE | 3.2 NAME | |
| STREET ADDRESS | 401 DEERFOOT LANE | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | CANTONMENT FL 32533 | 3.4 CITY-ST-ZIP | |
| TITLE | | 4.1 TITLE | |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP | |
| TITLE | | 5.1 TITLE | |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| TITLE | | 6.1 TITLE | |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 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, with all other like empowered.

SIGNATURE: David H. Ivey (DAVID H. Ivey) DATE 4-11-99

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)