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May 05 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 737391 (3)

1. Corporation Name
HOPE BAPTIST CHURCH OF THERESSA, INC.



Principal Place of Business Mailing Address
SE 90TH AVENUE SE 36TH AVENUE
RT. 3, BOX 1149 RT. 3, BOX 1149
STARKE FL 32091 STARKE FL 32091-8341

3. Date Incorporated or Qualified 11/30/1976 3a. Date of Last Report 04/24/1996

2. Principal Place of Business 2a. Mailing Address

4. FEI Number 59-2350316 Applied For Not Applicable

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

5. Certificate of Status Desired \$8.75 Additional Fee Required

22 City & State 27 City & State

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

23 Zip Country 28 Zip Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NEWELL, PAUL D. ESQ.
NIGHTINGALE ST. AT PALMETTO AVENUE
P. O. BOX 654
KEYSTONE HGHTS FL 32856

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P	DELETE
NAME	COONS, EUGENE V.	
STREET ADDRESS	RT 3 BOX 622	
CITY-ST-ZIP	STARKE FL	
TITLE	STR	DELETE
NAME	HERSEY, JOHN WAYNE	
STREET ADDRESS	RT 3 BOX 701	
CITY-ST-ZIP	STARKE FL	
TITLE	T	DELETE
NAME	TRIST, ERNEST	
STREET ADDRESS	RT 3 BOX 640	
CITY-ST-ZIP	STARKE, FL 00000	
TITLE	TR	DELETE
NAME	FAULK, JOE	
STREET ADDRESS	P.O. BOX 235/GRIFFIS LOOP	
CITY-ST-ZIP	STARKE FL	
TITLE	TR	DELETE
NAME	SULLIVAN, PERCY	
STREET ADDRESS	ROUTE 3, BOX 1175	
CITY-ST-ZIP	STARKE FL	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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.

CR2E037 (9/96)