FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

(6)

TRUSTEES OF BRANCHTON BAPTIST CHURCH, INC.

FILED May 09 1997 8:00am Secretary of State



Principal Place of Business Mailing Address						i inglii fâdii deben ilabi Bilin ildib	IIDI OFDII GIBII BIBII		111 61811 1881	
15310 MORRIS THONOTOSASS			15310 MORRIS BRIDGE ROAD THONOTOSASSA FL 33592-2234							
						3. Date Incorporated or Qualified 04/19/1978	3a. Date of 05/0	Last Ro 1/199	port 96	
2. Principal Pl	ace of Business	2a. Mailing Add	2a. Mailing Address			4. FEI Number			plied For]
21		26	4 - 1			NOT APPLICABLE	HOLADINGE			
Sulte, Apt. 1	·	27				5. Certificate of Status Desired	1 1 7 7	Fee Required		
City & State			City & State			6. Election Campaign Financing \$5.00 May Be				
23		28	4			Trust Fund Contribution				┨
Zip	Country	 	├ ── , ` ├ ──			1	poration has liability for intangible tax under s. 199.032, Statutes			
24	9. Name and Address of Curre	29 30 30 I Registered Agent				Florida Statutes				-
	5, 144110 0110 14401000 01 04110	itt ttogistoroo Agoni		81	Name	10. Name and Address of from the	gistorou Agorii			┨
KDLITÇIN	IGER, STEVEN M									
15299 M	ORRIS BRIDGE ROAD			82	Street A	dress (P.O. Box Number is Not Acceptable)				
THONOT	OSASSA FL 33592			83						
				84	City		FL 85	Zip C	Code	1
11. Pursuant t	to the provisions of Sections 617.05	02 and 617,1508, Flo	rida Statutes.	the above	l e-named c	corporation submits this statement for the	ournose of chan	oina Its	registered	-
office or re	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such cha	inge was autl	horized by	the corpo	pration's board of directors. I hereby acce	pt the appointm	ent as r	registered	
SIGNATURE _										
	gent and title if applicable.	(NOTE: R		ent signature re	equired when reinstating)	DATE			ي إ	
12.	STD OFFICERS AN	ND DIRECTORS	DELETE	13.		ADDITIONS/CHANGES TO OFFI		-CTORS	S IN 12 Addition	- 00
NAME	DYKES, RITA C.	u	PLLETE		}		L_1 0	ianyc	Manifoli	18
· · · · · · .	AFAAF MADDIA DDIDAF DAAD			1,2 NAME 1,3 Street address						3
STREET ADDRESS	THONOTOSASSA FL	1 0]					Įū
CITY-ST-ZIP TITLE	V		DELETE	1,4 CITY - S 21 TITLE	II-ZIF		Пс	hange	Addition	-18
NAME	WATSON, FLETCHER			2.2 NAME						1
STREET ADDRESS	10631 BROKEN ARROW DRI	IVE		2.3 STREET	ADDRESS					
CITY-ST-ZIP	THONOTOSASSA FL			2. 4 CITY-3	i i					1
TITLE	P		DELETE	3.1 TITLE			□ C	hange	Addition	1
NAME	RICHBURG, JAMES			3.2 NAME	1					
STREET ADDRESS	15275 MORRIS BRIDGE RD			3.3 STREET	ADORESS					
CITY-ST-ZIP	THONOTOSASSA FL			3.4. CITY-1	ST-ZIP					١
TITLE	D		DELETE	4.1 TITLE				hange	Addition	1
NAME	FULFORD, CLARENCE			4 2 NAME						
STREET ADDRESS	15421 MORRIS BRIDGE RD			4.3 STRFET	ADDRESS					
CITY+ST-ZIP	THONOTOSASSA FL			4.4 CITY - S	7 - 7 IP					
TITLE	D		DELETE	5.1 TITLE			□ c	hange	☐ Addition	1
NAME	ARNOLD, ROBERTSON F.			5.2 NAME)					
STREET ADDRESS	15425 MORRIS BRIDGE RD			5.3 STREET	ADDRESS					
CITY-ST-ZIP	THONOTOSASSA FL			\$.4 CITY - S	T-ZIP					_
TITLE .			DELETE	6.1 TITLE			□c	nange	Addition	
NAME				6.2 NAME						
STREET ADDRESS				63 STREET	ADDRESS					
CITY-ST-ZIP		and the state of the state of		6.4 CITY - S		stad in Section 119 07(3Vi). Florida Statut	. 17			1
IA I DO DOYAL										

The company of the morniage with this unity opes not quality 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 be cute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an attachment with an address.