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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 743376 (6)

1. Corporation Name

THE FIRST BAPTIST CHURCH OF BRANFORD, INC.



Principal Place of Business

Mailing Address

BRANFORD PROFESSIONAL BUILDING
PLANT AVE.
BRANFORD FL 32008

BRANFORD PROFESSIONAL BUILDING
PLANT AVE.
BRANFORD FL 32008

3. Date Incorporated or Qualified
06/26/1978

3a. Date of Last Report
03/27/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number
59-1203217

Applied For
Not Applicable

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

SCOTT, JOHN L
BRANFORD PROFESSIONAL BUILDING
PLANT AVE.
BRANFORD FL 32008

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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME HALL, CARROLL
STREET ADDRESS 28837 79TH ROAD
CITY-ST-ZIP BRANFORD FL

1.1 TITLE T
1.2 NAME Fletcher, Robert
1.3 STREET ADDRESS P O Box 408 (N/A)
1.4 CITY-ST-ZIP Branford, FL 32008

TITLE SD
NAME MARGUESS, LINDA
STREET ADDRESS 8549 262ND TERRACE
CITY-ST-ZIP BRANFORD FL

2.1 TITLE T
2.2 NAME Frierson, W.D.
2.3 STREET ADDRESS 7731 CR 248
2.4 CITY-ST-ZIP O'Brien, FL 32071

TITLE TD
NAME GAYLARD, A.W.
STREET ADDRESS 27090 37TH ROAD
CITY-ST-ZIP BRANFORD FL

3.1 TITLE T
3.2 NAME Gaylard, A.W.
3.3 STREET ADDRESS 27090 37th Road
3.4 CITY-ST-ZIP Branford, FL 32008

TITLE TD
NAME PERLOWICH, AARON
STREET ADDRESS P.O. BOX 111
CITY-ST-ZIP BRANFORD FL

4.1 TITLE C/T
4.2 NAME Perlowich, Aaron
4.3 STREET ADDRESS 30279 73rd Place
4.4 CITY-ST-ZIP Branford, FL 32008

TITLE TD
NAME MOSES, ODESSA
STREET ADDRESS RT 1 BOX 25
CITY-ST-ZIP BRANFORD FL

5.1 TITLE T
5.2 NAME Moses, Odessa
5.3 STREET ADDRESS Rt 1, Box 25
5.4 CITY-ST-ZIP Branford, FL 32008

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE T
6.2 NAME Sessions, Wallace
6.3 STREET ADDRESS 23216 Chinquapin Road
6.4 CITY-ST-ZIP Branford, FL 32008

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: Aaron Perlowich 01/21/97 (904) 935-3434

CR2E037 (9/96)