FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 24 AM 11:33

DOCUMENT # 744684 (2)

1. Corporation Name
SAMSULA BAPTIST CHURCH

Principal Place of Business	Mailing Address
223 N SAMSULA DR NEW SMYRNA BCH FL 32168	223 N SAMSULA DR NEW SMYRNA BCH FL 32168

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/24/1978
3a. Date of Last Report: 06/15/1994
4. FEI Number: 59-1369126 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

RAULERSON, FRANCES
~~3650 LETTUCE LANE~~ 371 N. Samsula Dr.
NEW SMYRNA BEACH FL 32168

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DS	1.1 TITLE	D ☒ Change ☒ Addition
NAME	~~LAWSON, LILLIAN~~	1.2 NAME	Nell Ledger
STREET ADDRESS	~~3685 PARSLEY LN~~	1.3 STREET ADDRESS	3696 Pioneer Trail
CITY-ST-ZIP	~~NEW SMYRNA BEACH FL~~	1.4 CITY-ST-ZIP	New Smyrna Beach, FL 32168
TITLE	D	2.1 TITLE	☒ Change ☐ Addition
NAME	RAULERSON, FRANCIS	2.2 NAME	
STREET ADDRESS	3650 LETTUCE LN	2.3 STREET ADDRESS	371 N. Samsula Dr.
CITY-ST-ZIP	NEW SMYRNA BEACH FL	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	KIRKLAND, MABEL	3.2 NAME	
STREET ADDRESS	4310 STATE RD. 44	3.3 STREET ADDRESS	
CITY-ST-ZIP	NEW SMYRNA BCH. FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	D ☒ Change ☒ Addition
NAME	~~HUGHES, WILLIAM G.~~	4.2 NAME	Marion Ceglar
STREET ADDRESS	~~3010 PAMPAS NURSERY DR.~~	4.3 STREET ADDRESS	4411 Sea Mist Court #177
CITY-ST-ZIP	~~NEW SMYRNA BCH. FL~~	4.4 CITY-ST-ZIP	New Smyrna Beach, FL 32168
TITLE	D	5.1 TITLE	☒ Change ☐ Addition
NAME	WARD, HERSCHEL R	5.2 NAME	Delete
STREET ADDRESS	1255 PEACHTREE RD.	5.3 STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BCH. FL	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	D ☐ Change ☒ Addition
NAME		6.2 NAME	Muriel Ranew
STREET ADDRESS		6.3 STREET ADDRESS	204 S. State Rd. 415
CITY-ST-ZIP		6.4 CITY-ST-ZIP	New Smyrna Beach, FL 32168

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Frances B. Raulerson 2/19/95 904-428-4860
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR — Date — Daytime Phone #
FRANCES B. RAULERSON

000144