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 11:34

DOCUMENT # **746202** **(1)**

1. Corporation Name
NEW TESTAMENT BAPTIST CHURCH OF FLORAL CITY, INC

Principal Place of Business	Mailing Address
90 PARKSIDE AVE PO BOX 480 FLORAL CITY FL 32636	90 PARKSIDE AVE PO BOX 480 FLORAL CITY FL 32636

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/12/1979
3a. Date of Last Report: 02/18/1994
4. FEI Number: 59-1914515 ☐ 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

HELMS, CLARENCE (PASTOR)
12400 S. FERN POINT
9850 S. PARKSIDE AVE.
FLORAL CITY FL 32636

10. Name and Address of New Registered Agent

81 Name: Joe Dale Pagan
82 Street Address (P.O. Box Number is Not Acceptable): 16131 Snow Memorial Hwy
83
84 City: Brooksville FL 85 Zip Code: 34601

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: Joe Dale Pagan
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	S	11 TITLE		☐ Change ☐ Addition
NAME	WILLIS, DORIS	12 NAME		
STREET ADDRESS	7200 E MANCHESTER CT	13 STREET ADDRESS		
CITY-ST-ZIP	FLORAL CITY FL	14 CITY-ST-ZIP		
TITLE	VD	21 TITLE	VD	☒ Change ☐ Addition
NAME	BURKE, ROBERT	22 NAME	Willis Thomas	
STREET ADDRESS	12422 SO FERN PT	23 STREET ADDRESS	7200 E Manchester Ct	
CITY-ST-ZIP	FLORAL CITY FL	24 CITY-ST-ZIP	Floral City, FL 34436	
TITLE	PD	31 TITLE	PD	☒ Change ☐ Addition
NAME	EVANS, BARRY	32 NAME	Messenger, Rodney	
STREET ADDRESS	8501 E LAKE BRADLEY RD	33 STREET ADDRESS	109 N. Adams St	
CITY-ST-ZIP	FLORAL CITY FL	34 CITY-ST-ZIP	Bushnell, FL 33513	
TITLE	TD	41 TITLE	TD	☐ Change ☐ Addition
NAME	PAGAN, JOE DALE	42 NAME	PAGAN, Joe Dale	
STREET ADDRESS	106131 SNOW MEMORIAL HWY	43 STREET ADDRESS	16131 Snow Memorial Hwy	
CITY-ST-ZIP	BROOKSVILLE, FL 00000	44 CITY-ST-ZIP	Brooksville, FL 34601	
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

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)(k), 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: Doris L. Willis 2/6/95 904-726-0360
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Doris L. Willis

0064701