

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



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

APPROVED
AND
FILED

95 APR 21, AM 9:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 751673 (5)

1. Corporation Name

HURRICANE CREEK BAPTIST CHURCH, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

% LARRY ZORN
RT 3 BOX 214
WESTVILLE FL 32464

% LARRY ZORN
RT 3 BOX 214
WESTVILLE FL 32464

3. Date Incorporated or Qualified

03/24/1980

3a. Date of Last Report

02/18/1994

4. FEI Number

59-2866431

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ZORN, WILLIAM E., SR
RT 3 BOX 208
WESTVILLE FL 32464

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME LAWSON, HOLLAND
STREET ADDRESS RT 3 BOX 240
CITY - ST - ZIP WESTVILLE FL 00000

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE D
NAME SEWELL, WILLIE
STREET ADDRESS RT 3 BOX 172
CITY - ST - ZIP WESTVILLE, FL 00000

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE T
NAME ZORN, LARRY
STREET ADDRESS RT 3 BOX 214
CITY - ST - ZIP WESTVILLE FL

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE D
NAME STAFFORD, RONALD
STREET ADDRESS RT 3 BOX 208
CITY - ST - ZIP WESTVILLE, FL 00000

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE D
NAME YARBROUGH, KENNETH
STREET ADDRESS RT 3 BOX 359
CITY - ST - ZIP WESTVILLE FL 00000

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE D
NAME ZORN, ERNEST
STREET ADDRESS RT 2 BOX 816
CITY - ST - ZIP PONCE DE LEON FL

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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Larry Zorn
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LARRY ZORN

4-5-95

904 956 2182

Units

(Optional) Filing #