

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 6/9/95: \$155 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$255)

**NONPROFIT
CORPORATION
ANNUAL REPORT
1995**



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 13 AM 10:11

DOCUMENT # 751798

(0)

1. Corporation Name

BIBLE BAPTIST CHURCH OF SEFFNER, INC.

Principal Place of Business
 HWY 92 AND BRINTWOOD ROAD
 PO BOX 1071
 SEFFNER FL 33584

Mailing Address
 HWY 92 AND BRINTWOOD ROAD
 PO BOX 1071
 SEFFNER FL 33584

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/31/1980	3a. Date of Last Report 04/07/1994
4. FEI Number 59-3166615	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 ☒	FILING FEE IS \$61.25
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business 21	2a. Mailing Address 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

**TRIPPLETT, ROGER A.
 10623 BAY HILLS CIR.
 THONOTOSASSA FL 33592**

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 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 reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	☐ Change ☐ Addition
NAME	TRIPPLETT, ROGER A.	12 NAME	
STREET ADDRESS	10623 BAY HILLS CIR.	13 STREET ADDRESS	
CITY - ST - ZIP	THONOTOSASSA FL	14 CITY - ST - ZIP	☐ Change ☐ Addition
TITLE	SD	21 TITLE	☐ Change ☐ Addition
NAME	BRANDER, CAROL	22 NAME	
STREET ADDRESS	1020 BRINTWOOD DRIVE	23 STREET ADDRESS	
CITY - ST - ZIP	SEFFNER FL	24 CITY - ST - ZIP	☐ Change ☐ Addition
TITLE	VD	31 TITLE	☐ Change ☐ Addition
NAME	DRAPER, RICHARD	32 NAME	
STREET ADDRESS	11504 OLD HILLSBOROUGH AVENUE	33 STREET ADDRESS	
CITY - ST - ZIP	SEFFNER FL	34 CITY - ST - ZIP	☐ Change ☐ Addition
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY - ST - ZIP		44 CITY - ST - ZIP	☐ Change ☐ Addition
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY - ST - ZIP		54 CITY - ST - ZIP	☐ Change ☐ Addition
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 110.07(3)(b), 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: Roger A. Triplett Roger A. Triplett

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/7/95 (812) 685-8114

Date

Telephone #

CR2E037 (3/95)