

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 752997 (7)
1. Corporation Name
HOPEWELL BAPTIST CHURCH, INC.



Principal Place of Business
**6001 S.STATE RD.39
PLANT CITY FL 33567**

Mailing Address
**6001 S.STATE RD.39
PLANT CITY FL 33567**

3. Date Incorporated or Qualified **06/17/1980** 3a. Date of Last Report **02/21/1995**

2. Principal Place of Business		2a. Mailing Address		4. FEI Number 59-2011248		Applied For ☐ Not Applicable	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
22 City & State		27 City & State		6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
23 Zip		28 Zip		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No			
24 Country		29 Country					
25		30					

9. Name and Address of Current Registered Agent

**WATKINS, E. C., JR.
2010 S. BUGG RD.
PLANT CITY FL 33567**

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	P ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	SANDERS, KENNETH, G	1.2 NAME	
STREET ADDRESS	2706 WOODLAND HILLS AVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	LAKELAND FL	1.4 CITY-ST-ZIP	
TITLE	T ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	BUGG, BETH	2.2 NAME	
STREET ADDRESS	402 E. McDONALD RD	2.3 STREET ADDRESS	
CITY-ST-ZIP	PLANT CITY, FL 00000	2.4 CITY-ST-ZIP	
TITLE	S ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	DURRANCE, MARTHA	3.2 NAME	
STREET ADDRESS	3005 S.SAPP RD.	3.3 STREET ADDRESS	
CITY-ST-ZIP	PLANT CITY, FL 00000	3.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	HASTY, JOHN	4.2 NAME	
STREET ADDRESS	4610 S.DRAWDY RD.	4.3 STREET ADDRESS	
CITY-ST-ZIP	PLANT CITY, FL 00000	4.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	EVERS, LLOYD	5.2 NAME	
STREET ADDRESS	7808 SOUTH S.R. 39	5.3 STREET ADDRESS	
CITY-ST-ZIP	PLANT CITY, FL 00000	5.4 CITY-ST-ZIP	
TITLE	VPD ☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	WILLIS, HAROLD G., JR.	6.2 NAME	
STREET ADDRESS	6002 SOUTH S.R. 39	6.3 STREET ADDRESS	
CITY-ST-ZIP	PLANT CITY FL	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 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: Beth Bugg Beth Bugg T. 2/14/96 813-137-3034
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)