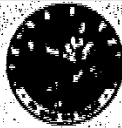


FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 11:33

DOCUMENT # **764148** (3)
1. Corporation Name
BIBLE BAPTIST TEMPLE OF PUNTA GORDA, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business 6600 CLEVELAND DR. PUNTA GORDA FL 33982	Mailing Address 6600 CLEVELAND DR. PUNTA GORDA FL 33982
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3. Date Incorporated or Qualified 07/14/1982	3a. Date of Last Report 05/01/1994
4. FEI Number 59-2171934	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input checked="" type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

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

9. Name and Address of Current Registered Agent

**ROPKE, F.W. CARL
3709 DAWSON LANE
PUNTA GORDA FL 33982**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	ROPKE, F.W.CARL
STREET ADDRESS	3709 DAWSON LN
CITY-ST-ZIP	PUNTA GORDA FL
TITLE	D
NAME	WESSEL, HERMAN
STREET ADDRESS	1478 NAVIGATOR ROAD
CITY-ST-ZIP	PORT CHARLOTTE FL
TITLE	S
NAME	HOLDER, PEGGY
STREET ADDRESS	30555 WASHINGTON LOOP RD
CITY-ST-ZIP	PUNTA GORDA FL
TITLE	D
NAME	RADFORD, ROLAND
STREET ADDRESS	35519 WASHINGTON LOOP RD
CITY-ST-ZIP	PUNTA GORDA FL
TITLE	T
NAME	LAVERNE, THOMAS
STREET ADDRESS	447 HIBISEUS ROAD
CITY-ST-ZIP	CHARLOTTE HARBOR FL
TITLE	T
NAME	TOLBERT, DANIEL
STREET ADDRESS	257 NORTH VIEW
CITY-ST-ZIP	PT CHARLOTTE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	S Pat Sadler
3.3 STREET ADDRESS	30900 Washington Loop Rd,
3.4 CITY-ST-ZIP	Punta Gorda, FL 33982
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 119.07(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: *F.W. Carl Repke III* **F.W. Carl Repke III** 4-19-95 (813) 637-1715