

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # 765480 (9)

95 APR -5 PM 2: 53

1. Corporation Name
FAITH BAPTIST CHURCH OF SPRING HILL, FLORIDA, IN C.

Principal Place of Business Mailing Address
**175 SPRINGTIME RD. 175 SPRINGTIME RD.
SPRING HILL FL 34608-7069 SPRING HILL FL 34608-7069**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **10/20/1982** 3a. Date of Last Report **08/08/1994**
4. FEI Number **59-2867220** 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
24 25 29 30

5. Certificate of Status Desired **\$0.75 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

**TASSEY, WILLIAM
397 JENICO CT
SPRINGHILL FL 34609**

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 607.0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, 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

William Tassey

(NOTE: Registered Agent signature required when reinstating)

WILLIAM TASSEY

DATE

12. OFFICERS AND DIRECTORS

| | |
|-----------------|-----------------------------|
| TITLE | D |
| NAME | FIELDS, WALTER |
| STREET ADDRESS | 14430 VAN COURT |
| CITY - ST - ZIP | SPRING HILL FL 34610 |
| TITLE | D |
| NAME | KELLUM, WILLIAM |
| STREET ADDRESS | 15153 KITTRELL DR |
| CITY - ST - ZIP | SPRING HILL FL 34610 |
| TITLE | T |
| NAME | STYLES, VIRGINIA |
| STREET ADDRESS | 17325 DALBERG |
| CITY - ST - ZIP | SPRING HILL FL 34610 |
| TITLE | D |
| NAME | TASSEY, WILLIAM |
| STREET ADDRESS | 175 SPRINGTIME ST. |
| CITY - ST - ZIP | SPRING HILL FL 34609 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY - ST - ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY - ST - ZIP | |

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 type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME | |
| 3.3 STREET ADDRESS | |
| 3.4 CITY - ST - ZIP | |
| 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 | D. BENTLEY, ROGER |
| 5.3 STREET ADDRESS | 760 SUNDAET |
| 5.4 CITY - ST - ZIP | SPRINGHILL FL 34609 |
| 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 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

William Tassey
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WILLIAM TASSEY

Title

Signature Number