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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 766059

1. Corporation Name
FIRST BAPTIST CHURCH, INC., OF BAKER, FLORIDA

Principal Place of Business 1347 E 14TH ST BAKER FL 32531 US	Mailing Address P.O. BOX 333 BAKER FL 32531 US
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified 12/10/1982	4. FEI Number 59-2116433	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		

9. Name and Address of Current Registered Agent

JORDAN, MARTHA C.
 5728 HWY 4
 BAKER FL 32531

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	T	1.1 TITLE	TR
NAME	CARR, MARVIS	1.2 NAME	Carr, Marvis
STREET ADDRESS	6161 N HWY 189	1.3 STREET ADDRESS	6161 N Hwy 189
CITY-ST-ZIP	BAKER FL 32531	1.4 CITY-ST-ZIP	Baker, Fl. 32531
TITLE	TTR	2.1 TITLE	T
NAME	JORDAN, MARTHA C	2.2 NAME	Jordan, Martha C.
STREET ADDRESS	5728 HWY 4	2.3 STREET ADDRESS	5728 Hwy 4
CITY-ST-ZIP	BAKER FL 32531	2.4 CITY-ST-ZIP	Baker, Fl 32531
TITLE	TR	3.1 TITLE	
NAME	THOMPSON, EARL	3.2 NAME	
STREET ADDRESS	954 HWY 4A	3.3 STREET ADDRESS	
CITY-ST-ZIP	BAKER FL 32531	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	TR
NAME		4.2 NAME	Langston, Francis D.
STREET ADDRESS		4.3 STREET ADDRESS	6706 Old River Rd.
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Baker, Fl. 32531
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE: Martha C. Jordan SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 DATE: Jan. 6, 1999 DAYTIME PHONE #: 850-537-4591

CR2E037 (11/98)