

FILE NOW: FILING FEE IS \$61.25

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May 18 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 768730 (4) 1. Corporation Name BAPTIST HOME FOR CHILDREN, INC.			
Principal Place of Business % JIM COLE 2300 BARTRAM RD. JACKSONVILLE FL 32207		Mailing Address % JIM COLE 2300 BARTRAM RD. JACKSONVILLE FL 32207	
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 06/01/1983		4. FEI Number 59-0651072	
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. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent COLE, JIM 2300 BARTRAM RD. JACKSONVILLE FL 32207		10. Name and Address of New Registered Agent 81 Name PHILIP R. HARRISON 82 Street Address (P.O. Box Number is Not Acceptable) 2300 BARTRAM RD. 83 84 City JACKSONVILLE FL 85 Zip Code 32207	
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 Philip R. Harrison, Intern Director			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P NAME NAPIER, DR. S STREET ADDRESS 7844 FEATHER OAKS DRIVE CITY-ST-ZIP JACKSONVILLE FL		1.1 TITLE P 1.2 NAME melton, DR. RAY 1.3 STREET ADDRESS 6805 SAN SEBASTIAN AVE 1.4 CITY-ST-ZIP JACKSONVILLE, FL 32217	
TITLE S NAME SPIERS, BILL STREET ADDRESS 3770 TOWNSEND OAK CT. CITY-ST-ZIP JACKSONVILLE FL		2.1 TITLE S 2.2 NAME WOOD, TY 2.3 STREET ADDRESS 1521 RIVER OAKS Rd. 2.4 CITY-ST-ZIP JACKSONVILLE, FL 32207	
TITLE V NAME VAN LANDINGHAM, JIM STREET ADDRESS 7801 HOLLYRIDGE CIR. CITY-ST-ZIP JACKSONVILLE FL		3.1 TITLE V 3.2 NAME MURRAY, Rev. Michael 3.3 STREET ADDRESS 6661 RAMOTH DR. 3.4 CITY-ST-ZIP JACKSONVILLE FL 32226	
TITLE TD NAME HITZING, ELLIS W. STREET ADDRESS 5837 BUFFALO AVENUE CITY-ST-ZIP JACKSONVILLE FL		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE D NAME CONNELL, JACK STREET ADDRESS 10261 BRIARCLIFF ROAD CITY-ST-ZIP JACKSONVILLE FL		5.1 TITLE D 5.2 NAME ALLEN, DR. DAN 5.3 STREET ADDRESS 1824 DEAN Rd. 5.4 CITY-ST-ZIP JACKSONVILLE, FL 32216	
TITLE D NAME COLE, JIM STREET ADDRESS 2300 BARTRAM ROAD CITY-ST-ZIP JACKSONVILLE FL		6.1 TITLE D 6.2 NAME HARRISON, Philip R. 6.3 STREET ADDRESS 2300 BARTRAM RD. 6.4 CITY-ST-ZIP JACKSONVILLE, FL 32207	

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.

SIGNATURE:

CR2E037 (10/97)