

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

95 APR 12 PM 12:15

DOCUMENT # 769795 (6)

1. Corporation Name

HARMONY BAPTIST ASSOCIATION, INCORPORATED OF BRO
N SON, FLORIDA

Principal Place of Business

Mailing Address

SR NO. 26. 1 MI. WEST OF TRENTON
P.O. BOX 877
TRENTON FL 32693

SR NO. 26. 1 MI. WEST OF TRENTON
P.O. BOX 877
TRENTON FL 32693

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/11/1983 3a. Date of Last Report 04/25/1994

4. FEI Number 59-2147597 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc. P.O. Box 23

26 Suite, Apt. #, etc. P.O. Box 23

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WHITMIRE, BESS K.
WEIVA ROAD
PO BOX 487
BRONSON FL 32621

81 Name Layfield, Ronald G.
82 Street Address P.O. Box Number is Not Acceptable NE 14th Street (13850)
83 Rt. 3, Box 105
84 City Trenton FL 85 Zip Code 32693-9738

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 Ronald G. Layfield, Assoc. Treasurer - Ronald G. Layfield 4/6/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	MD
NAME	BEAYCHAMP, W.O., JR.
STREET ADDRESS	PO BOX 917 N/A
CITY - ST - ZIP	CHIEFLND FL
TITLE	CD
NAME	WHITMIRE, BESS K. (CLERK)
STREET ADDRESS	PO BOX 487 N/A
CITY - ST - ZIP	BRONSON FL
TITLE	TD
NAME	LAYFIELD, RONALD G.
STREET ADDRESS	RT. 3, BOX 105
CITY - ST - ZIP	TRENTON FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	Change Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	Change Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	Change Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	Change Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	Change Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	Change 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)(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: Ronald G. Layfield 2/13/95 (924) 463-2252
Signature and typed or printed name of signing officer or director Date

Ronald G. Layfield, Assoc. Treasurer