

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

CORPORATION
ANNUAL REPORT
1995



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

FILED

95 JUL -7 AM 8:48

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # 771092 (4)

1. Corporation Name

FIRST FREE WILL BAPTIST CHURCH OF AUBURDALE, FL
ORIDA, INC.

Principal Place of Business

Mailing Address

LE. FLORIDA, INC.
107 ROSE ST
AUBURDALE FL 33823
US

LE. FLORIDA, INC.
107 ROSE ST
AUBURDALE FL 33823
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 11/04/1983
3a. Date of Last Report 04/20/1994

4. FEI Number 59-2514301
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.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WEITMAN, LESTER
107 ROSE ST
AUBURDALE FL 33823

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME PAUL, MAXWELL
STREET ADDRESS 105 PIKE ST
CITY-ST-ZIP AUBURDALE, FL 00000

1.1 TITLE D Sanford W. Lynn Change Addition
1.2 NAME
1.3 STREET ADDRESS 113 Clayton Rd.
1.4 CITY-ST-ZIP Auburn Dale, Fl.

TITLE VD
NAME LAWRENCE, JUNIOR
STREET ADDRESS 603 OAK STREET
CITY-ST-ZIP AUBURDALE FL

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE SD
NAME HUITO, PEGGY L Sarah J. Panist
STREET ADDRESS 106 MASSABOTT ST 4245 K-Ville Ave
CITY-ST-ZIP AUBURDALE FL Auburndale Fl.

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE TD
NAME DICKERSON, PAULINE Sharon J. Lynn
STREET ADDRESS 234 NELSON AVENUE 113 Clayton Rd.
CITY-ST-ZIP AUBURDALE FL Auburndale, Fl.

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE D
NAME DAVIS, W.F.
STREET ADDRESS 811 MELTON AVENUE
CITY-ST-ZIP AUBURDALE FL

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE PD
NAME WEITMAN, LESTER
STREET ADDRESS 107 ROSE ST.
CITY-ST-ZIP AUBURDALE FL

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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: *Lester Weitman* Lester Weitman 5/24/95 941-967-2702
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #