

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

JAN 30 1996

DOCUMENT # 818067 (1)

1. Corporation Name

CONSERVATIVE BAPTIST HOME MISSION SOCIETY

Principal Place of Business

25W560 GENEVA ROAD
P.O. BOX 828
WHEATON IL 60189-0828

Mailing Address

25W560 GENEVA ROAD
P.O. BOX 828
WHEATON IL 60189-0828



3. Date Incorporated or Qualified
07/24/1964

3a. Date of Last Report
03/28/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

4. FEI Number

36-2225484

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

REYES, OMAR
4743 MESA VERDE DR
ST. CLOUD FL 34769

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME DP
MAGEE, LES
STREET ADDRESS 1770 E 6200 S
CITY-ST-ZIP OGDEN UT

TITLE ☐ DELETE

NAME D
ESTEP, JOHN H
STREET ADDRESS 25W560 GENEVA ROAD
CITY-ST-ZIP WHEATON, IL 00000

TITLE ☐ DELETE

NAME DT
JEFFREYS, RICHARD GREY
STREET ADDRESS 25W560 GENEVA ROAD
CITY-ST-ZIP WHEATON, IL 00000

TITLE ☐ DELETE

NAME DS
THOMPSON, DR FAYE
STREET ADDRESS 3741 S WALDEN WAY
CITY-ST-ZIP AURORA CO

TITLE ☐ DELETE

NAME DV
DAVIS, DONALD
STREET ADDRESS 1215 MARLBOROUGH AVE.
CITY-ST-ZIP INGLEWOOD CA

TITLE ☐ DELETE

NAME DS
HILL, MR CAREY
STREET ADDRESS 5 DEVONSHIRE CT
CITY-ST-ZIP PEEKSKILL NY

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

D
Richard A. Miller
25W560 Geneva Road
Wheaton, IL 60188

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 119.07(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:

Richard A. Miller

Richard A. Miller, Executive Director

708/260-3800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)