FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
'95 JAN 26 PM 3:41

DOCUMENT # 836893 (8)

1. Corporation Name

AMERICAN BAPTIST FOREIGN MISSION SOCIETY, "INCOR PORATED"

Principal Place of Business	Mailing Address
RTE 363 & FIRST AVE P O BOX 851 VALLEY FORGE PA 19482-0851	RTE 363 & FIRST AVE P O BOX 651 VALLEY FORGE PA 19482-0851

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/23/1976
3a. Date of Last Report: 06/16/1994
4. FEI Number: 13-5563392 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business
21
22 Suite, Apt. #, etc.
23 City & State
24 Zip 25 Country

2a. Mailing Address
26
27 Suite, Apt. #, etc.
28 City & State
29 Zip 30 Country

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

9. Name and Address of Current Registered Agent

STULL, HAROLD
23371 BLUEWATER CR #C-514
BOCA RATON FL 33433

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 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 _____ 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	PD	1.1 TITLE	PD	☒ Change ☐ Addition
NAME	BUCKLES, MICHAEL A.	1.2 NAME	IRISH, REV. ESTHER M.R.	
STREET ADDRESS	3144 N. 53RD PLACE	1.3 STREET ADDRESS	R.D. 1, BOX 821	
CITY-ST-ZIP	PHOENIX AZ 85018	1.4 CITY-ST-ZIP	MONMOUTH, ME 04259	
TITLE	VD	2.1 TITLE	VD	☒ Change ☐ Addition
NAME	OLDHAM, REV. HAZEL V.	2.2 NAME	MIRAZ, MISS LAURA	
STREET ADDRESS	2219 MONTEBELLO COURT WEST	2.3 STREET ADDRESS	456 EFFINGHAM AVENUE	
CITY-ST-ZIP	COLORADO SPRINGS CO 80918	2.4 CITY-ST-ZIP	BRONX, NY 10473	
TITLE	MD	3.1 TITLE		☒ Change ☐ Addition
NAME	SANDQUIST, REV. JOHN A.	3.2 NAME	SUNDQUIST, REV. JOHN A.	
STREET ADDRESS	NO. 29 MILITIA HILL DRIVE	3.3 STREET ADDRESS		
CITY-ST-ZIP	WAYNE PA 19087	3.4 CITY-ST-ZIP		
TITLE	S	4.1 TITLE		☐ Change ☐ Addition
NAME	GAGE, PHILIP C	4.2 NAME		
STREET ADDRESS	327 VALLEY VIEW RD.	4.3 STREET ADDRESS		
CITY-ST-ZIP	KING OF PRUSSIA PA 19406	4.4 CITY-ST-ZIP		
TITLE	T	5.1 TITLE		☒ Change ☐ Addition
NAME	JONES, CORNELIUS C.	5.2 NAME		
STREET ADDRESS	115 HARRY TOAD	5.3 STREET ADDRESS	115 HARRY ROAD	
CITY-ST-ZIP	EAGLEVILLE PE 19408	5.4 CITY-ST-ZIP	EAGLEVILLE, PA 19408	
TITLE	AT	6.1 TITLE		☐ Change ☐ Addition
NAME	SUTTON, ERNEST L	6.2 NAME		
STREET ADDRESS	1216 SOUTH BONSALL ST.	6.3 STREET ADDRESS		
CITY-ST-ZIP	PHILADELPHIA PA 19146	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 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: Cornelius C. Jones Cornelius C. Jones, Treasurer 1/20/95 (610)768-2205
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0078807