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Mar 12 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **836893** (8)

1. Corporation Name

AMERICAN BAPTIST FOREIGN MISSION SOCIETY, "INCORPORATED"

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 851
VALLEY FORGE PA 19482**

3. Date Incorporated or Qualified
08/23/1976

3a. Date of Last Report
02/20/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number
13-5563392

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

10. Name and Address of New Registered Agent

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

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **PD**
STREET ADDRESS **RAMIREZ, DANIEL A.**
CITY - ST - ZIP **423 LOMITA AVE
MILLBRAE CA**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE ☒ DELETE
NAME **VD**
STREET ADDRESS **MIRAZ, LAURA**
CITY - ST - ZIP **458 EFFINGHAM AVE.
BRONX NY**

2.1 TITLE ☒ Change ☒ Addition
2.2 NAME **VD**
2.3 STREET ADDRESS **CROUCH, BETTY L.**
2.4 CITY - ST - ZIP **1731 ARLINGTON BLVD.
HUNTINGTON, WV 25705**

TITLE ☐ DELETE
NAME **MD**
STREET ADDRESS **SUNDQUIST, JOHN A. R**
CITY - ST - ZIP **NO. 29 MILITIA HILL DRIVE
WAYNE PA**

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

TITLE ☐ DELETE
NAME **S**
STREET ADDRESS **HOFFMAN, JOAN F.**
CITY - ST - ZIP **218 GLENWOOD ROAD
KING OF PRUSSIA PA**

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

TITLE ☒ DELETE
NAME **T**
STREET ADDRESS **JONES, CORNELIUS C.**
CITY - ST - ZIP **115 HARRY RD.
EAGLEVILLE PA**

5.1 TITLE ☒ Change ☒ Addition
5.2 NAME **T**
5.3 STREET ADDRESS **BRUCE R. BORQUIST**
5.4 CITY - ST - ZIP **45 BRIMFIELD ROAD
AUDUBON, PA 19403-1976**

TITLE ☐ DELETE
NAME **AT**
STREET ADDRESS **SUTTON, ERNEST L**
CITY - ST - ZIP **8710 MARSHALL ROAD
WYNDMOOR PA**

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 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:

BRUCE R. BORQUIST, TREASURER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/27/97 (610) 7682205

Date

Daytime Phone # 0077141

CR2E037 (9/96)