

FILE NOW: FILING FEE IS \$61.25

FILED

**Jan 27 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N00331 (1)
1. Corporation Name

THE SEVENTH-DAY BAPTIST CHURCH OF DAYTONA BEACH, FLORIDA

Principal Place of Business 139-145 FIRST AVE DAYTONA BEACH FL 32114-0201	Mailing Address 139-145 FIRST AVE DAYTONA BEACH FL 32114-0201
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3. Date Incorporated or Qualified 12/13/1983	Applied For Not Applicable
4. FEI Number 59-1907993	

2. Principal Place of Business 21 Suite, Apt. #, etc.	2a. Mailing Address 26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Country
24 Country	25 Zip
29 Country	30 Zip

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**RUDERT, DOANLD G
876 W COLONIAL DR
DAYTONA BEACH FL 32117**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	RUDERT, DONALD G	
STREET ADDRESS	876 W COLONIAL DR	
CITY-ST-ZIP	DAYTONA BEACH FL	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	THOMPSON GORDON, PATRICIA A.	
STREET ADDRESS	1453 EDEN DR.	
CITY-ST-ZIP	DELTONA FL	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	HILL, ALFRED JR	
STREET ADDRESS	2649 BELMONT AVE	
CITY-ST-ZIP	NEW SMYRNA BEACH FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	PINDER, CLAYTON	
STREET ADDRESS	409 KNOTT WAY	
CITY-ST-ZIP	DELAND FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	SD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Hull, Dale
2.3 STREET ADDRESS	852 N Colonial Circle
2.4 CITY-ST-ZIP	Daytona Beach, FL 32117
3.1 TITLE	VD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Crouch, Alan
3.3 STREET ADDRESS	1518 Poplar Dr
3.4 CITY-ST-ZIP	Ormond Beach, FL 32174
4.1 TITLE	Thred. <input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Thred.
4.3 STREET ADDRESS	409 Knott Way
4.4 CITY-ST-ZIP	DeLand, FL 32724
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I 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: *Donald G Rudert* **1-18-98** 904-253-3574

CRPE037 (10/97)