FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # N06091

(5)

HIGHWAY EVANGELISTIC MINISTRIES OF THE BIBLE BAP TIST CHURCH, INC.

Principal Plac	e of Business	Mailing Address	Mailing Address				
DELAND FL 32		B72 GLENWOOD RD DELAND FL 32720-2373					
US		US					<u> </u>
						3. Date incorporated or Qualified 11/09/1984	3a. Date of Last Report 04/18/1996
2. Principal Place of Business		2a. Mailing Address				4. FEI Number	Applied For
21]		[26]				59-2478906	Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.				5. Certificate of Status Desired	S8.75 Additional
City & State		City & State					Fee Required
23		28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be		
Zip	Country	Z _I p	Coi	untry			Added to Fees
24	25	29	30	37 ILI y		8. This corporation has liability for in Florida Statutes	Yes 20 No
	9. Name and Address of Curr		1301	Т		10. Name and Address of New Reg	
				81	Name		
KNOX .	IAMES W.						
	MASCUS ROAD			82	Street Addr	ress (P.O. Box Number is Not Acceptable	e)
	FL 32724			83			
00010							
				84	City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 617.05	502 and 617.1508, Florida Statut	es, the a	bove	named corp	poration submits this statement for the price ion's board of directors. I hereby accept	urpose of changing its registered
agent. I a	m familiar with, and accept the obli	igations of, Section 617.0503, Fl	orida Sta	tutes.	the corporat	ion's board of directors. I nereby accept	t the appointment as registered
SIGNATURE							
10	Signature typeo or printed name of registered a			d Ager	ıl signature requir	ed when reinstating)	DATE
12.	PD OFFICERS A	ND DIRECTORS DELETE	13.	T. F	Υ	ADDITIONS/CHANGES TO OFFICE	
NAME	KNOX, JAMES W.			1.1 TITLE 1.2 NAME			☐ Change ☐ Addition
	ACC DILLAGOUS DOAD						
STREET ADDRESS	DELAND FL およ	ファム	1		ADDRESS		
CITY-ST-ZIP TITLE	VD VD	DELETE	1.4 C	HY-ST	- ZIP		Change Addition
NAME	SPADE, JOHN		-				Change Addition
	220 COLUMBUS CIRCLE		2.2 N				
STREET ADDRESS		2750	1		address		
CITY - ST - ZIP TITLE	SD SD	DELETE	2. 4 C	CITY - ST	T- ZtP	<u> </u>	Chance III Deplica
NAME	ROWDON, WADE L.						Change Addition
	230 CROOKED TREE TRAIL		3.2 N		Independ		
STREET ADDRESS		32724			ADDRESS		
CITY - ST - ZIP TITLE	TD (DELETE	_	CITY-SI	I - ZIP		[] Obones
	MCAULIFFE, RAYMOND J.	☐ pcrctp	4.1 1(•	Change Addition
NAME STREET ADDRESS	610 N GARFIELD AVE		4.21		1000000		
		224			ADDRESS		
CITY-ST-ZIP TITLE	DELAND FL 3スファ4		_	4.4 CITY-ST-ZIP 5.1 TITLE			Change
	MULLINS, TERRY						Change Addition
NAME STREET ANDRESS	1323 JACKSON WOODS RI	n .	5.2 N				
STREET ADDRESS	DELAND FL 3a	1724			ADDRESS		
CITY-ST-ZIP	DELAND FL DA	□ DELETE		ITY-ST	- ZIP		Change LA 4 200
TITLE			6.1 TI				Change Addition
NAME			6.2 N				
STREET ADDRESS			B		ADDRESS		
CITY-ST-ZIP			6.4 C	ITY-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

SIGNATURE AND TYPED OR PRINTED NAME & SIGNING OF

R. J. M. AULIFFE

17/97

904-726-3179

FILED

Jan 17 1997 8:00am

Secretary of State