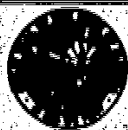


FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # N10434

(1)

1. Corporation Name

BIBLE BAPTIST CHURCH OF MANDARIN, FLORIDA, INC.

Principal Place of Business

**4211 JULINGTON CREEK RD
JACKSONVILLE FL 32223**

Mailing Address

**4211 JULINGTON CREEK RD
JACKSONVILLE FL 32223**

**APPROVED
AND
FILED**

95 APR 21 AM 9:43

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/25/1985

3a. Date of Last Report

04/22/1994

4. FEI Number

59-2566988

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**

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

Duval

2a. Mailing Address

25

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

Duval

9. Name and Address of Current Registered Agent

**PIETRYLO, ANDREW J.
11237 STONEY POINT LANE, EAST
JACKSONVILLE FL 32257**

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

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE

PD

NAME

PIETRYLO, ANDREW J.

STREET ADDRESS

11237 STONEY PT LN E

CITY-ST-ZIP

JACKSONVILLE FL

TITLE

TD

NAME

ROSS, DENWOOD F

STREET ADDRESS

6029 CR 200-S

CITY-ST-ZIP

GREEN COVE SPRINGS FL

TITLE

SD

NAME

TUNNING, JACKIE L

STREET ADDRESS

1724 DUNRAVEN LANE

CITY-ST-ZIP

JACKSONVILLE FL

TITLE

D

NAME

WARGO, BRYAN S

STREET ADDRESS

4351 PHILLIPS HWY #21

CITY-ST-ZIP

JACKSONVILLE FL

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

32257

2.1 TITLE

☐ Change ☒ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

32043

3.1 TITLE

☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

**2156 Forest Hollow Way
Fruit Cove, FL 32259**

4.1 TITLE

☐ Change ☒ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

32207

5.1 TITLE

☐ Change ☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

**D Johnson, David, A.
3917 English Colony Dr. N.
Jacksonville, FL 32257**

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 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Jackie Tunning Secretary
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/95

704-282-8826

Date

Daytime Phone #