## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997

CITY-ST-ZIP

appears in Block 12 or Block 13 if changed, or on an attachment with an address



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 10 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N10434

(1)

BIBLE BAPTIST CHURCH OF MANDARIN, FLORIDA, INC.

Principal Place of Business Mailing Address 4211 JULINGTON CREEK RD 4211 JULINGTON CREEK RD JACKSONVILLE FL 32223-2019 JACKSONVILLE FL 32223 Date of Last Report 02/08/1996 3. Date incorporated or Qualified 07/25/1985 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2566988 Not Applicable 26 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional X 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be П 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, 32223-2001 32223-200 Yes X No 24 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name PIETRYLO, ANDREW J. 82 Street Address (P.O. Box Number is Not Acceptable) 11237 STONEY POINT LANE, EAST 83 JACKSONVILLE FL 32257 84 City 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) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) 12. 13. DELETE Change Addition TITLE 1.1 THUE NAME PIETRYLO, ANDREW J. 1.2 NAME 11237 STONEY PT LN E 1.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE ROSS, DENWOOD F 2.2 NAME NAME 6029 CR 209-S STREET ADDRESS 2.3 STREET ADDRESS **GREEN COVE SPRINGS FL** 2.4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE 3.1 TITLE Addition TITLE TUNNING, JACKIE L 3.2 NAME NAME 2156 FOREST HOLLOW WAY 3.3 STREET ADDRESS STREET ADDRESS FRUIT COVE FL 3.4. CITY-ST-ZIP CITY - ST - 7/P DELETE 4.1 TITLE Change Addition TITLE WARGO, BRYAN S NAME 4.2 NAME 4351 PHILLIPS HWY #21 STREET ADDRESS 4.3 STREET ADDRESS JACKSONVILLE FL 4.4 City-St-2iP CITY - ST - ZIP DELETE ☐ Change ■ Addition TITLE 51 TITLE JOHNSON, DAVID A. NAME 5.2 NAME 3917 ENGLISH COLONY DR N. **53 STREET ADDRESS** STREET ADDRESS JACKSONVILLE FL 5.4 CITY-ST-ZIP CITY - ST - ZIP □ DELETE 6.1 TITLE Change Addition TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

SIGNATURE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Dayling Phone 40005868

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