SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 8, 1995.
AMOUNT DUE ON OR BEFORE 8/8/95: $155 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $305)

NONPROFIT CORPORATION ANNUAL REPORT

1995 8-4-95 B-81000 XC

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 AUG -4 AM 10:53

DOCUMENT # **N10618** (9)

1. Corporation Name

LONGWOOD HILLS BAPTIST CHURCH, INC.

Principal Place of Business	Mailing Address
1255 E.E. WILLIAMSON RD P.O. BOX 521550 LONGWOOD FL 32752-8550	1255 E.E. WILLIAMSON RD P.O. BOX 521550 LONGWOOD FL 32752-8550

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/08/1985
3a. Date of Last Report: 08/21/1994
4. FEI Number: 59-2597930 ☐ 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 ☑ FILING FEE IS $61.25
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

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

9. Name and Address of Current Registered Agent

BURTON, DALE
3059 TOTIKA COVE
LONGWOOD FL 32779

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DFO	11 TITLE	P ☐ Change ☐ Addition
NAME	BURTON, DALE	12 NAME	Hansen, Joan
STREET ADDRESS	3059 TOTIKA COVE	13 STREET ADDRESS	111 Red Cedar Drive
CITY-ST-ZIP	LONGWOOD FL	14 CITY-ST-ZIP	Longwood, Fl. 32779
TITLE	D	21 TITLE	V ☐ Change ☐ Addition
NAME	WIGGINS, MEREDITH	22 NAME	Moore, Harry
STREET ADDRESS	999 CROSS CUT WAY	23 STREET ADDRESS	1382 Cor Jesu Ct.
CITY-ST-ZIP	LONGWOOD FL	24 CITY-ST-ZIP	Longwood, Fl. 32750
TITLE	D	31 TITLE	T ☐ Change ☐ Addition
NAME	CLEVELAND, MARY ANNE	32 NAME	Varnon, Robert
STREET ADDRESS	39 STONEGATE SOUTH	33 STREET ADDRESS	2377 Roanoke Ct.
CITY-ST-ZIP	LONGWOOD FL	34 CITY-ST-ZIP	Lake Mary, Fl. 32746
TITLE		41 TITLE	S ☐ Change ☐ Addition
NAME		42 NAME	Holland, Robbie
STREET ADDRESS		43 STREET ADDRESS	842 Woodcrest Cove
CITY-ST-ZIP		44 CITY-ST-ZIP	Longwood, Fl. 32750-2984
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

CR2E037 (3/95)

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)(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: Robert L Varnon TREASURER 7/26/95 407-834-3300
Robert L Varnon, Jr.
FILING AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR — Date — Daytime Phone #

0003821