

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

SECRET
DIVISION
95 APR

CORPORATION ANNUAL REPORT 1995

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

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

95 APR 14 AM 10:00

DOCUMENT # **N11796** (2)
 1. Corporation Name
MT. CALVARY FIRST BAPTIST CHURCH OF SOUTH BAY, I NC.

Principal Place of Business Mailing Address
180 SW 10TH AVE SOUTH BAY FL 33480 **180 SW 10TH AVE SOUTH BAY FL 33493**

DO NOT WRITE IN THIS SPACE

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

3. Date Incorporated or Qualified **10/29/1985** 3a. Date of Last Report **04/08/1984**
 4. FEI Number **06-0212160** 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

9. Name and Address of Current Registered Agent
CHILDS, WILLIE MACK
225 SW 10TH AVE
SOUTH BAY FL 33493

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

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	COOPER, ROOSEVELT
STREET ADDRESS	660 W 37TH ST
CITY - ST - ZIP	RIVIERA BEACH FL
TITLE	TD
NAME	CHILDS, WILLIE MACK
STREET ADDRESS	225 SW 10TH AVE
CITY - ST - ZIP	SOUTH BAY FL
TITLE	SD
NAME	WITCHARD, BETTY (FINAN)
STREET ADDRESS	250 SW 7TH AVE
CITY - ST - ZIP	SOUTH BAY FL
TITLE	SD
NAME	CHILDS, LEXIE M (RCNDG)
STREET ADDRESS	225 SW 10TH AVE
CITY - ST - ZIP	SOUTH BAY FL
TITLE	D
NAME	ROKER, BERTHA M
STREET ADDRESS	185 SW 10TH AVE
CITY - ST - ZIP	SOUTH BAY FL
TITLE	D
NAME	LEWIS, PAULINE
STREET ADDRESS	280 NW 12TH AVE
CITY - ST - ZIP	SOUTH BAY FL

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	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(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 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]* **ROOSEVELT COOPER** 4/14/95
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 607 842 7587