

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N11796 (2)

1. Corporation Name
MT. CALVARY FIRST BAPTIST CHURCH OF SOUTH BAY, I NC.



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

3. Date incorporated or Qualified: **10/29/1985**
3a. Date of Last Report: **04/14/1995**

21	2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
	Suite, Apt. #, etc.	Suite, Apt. #, etc.	06-0212160	Not Applicable
22	City & State	City & State	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
23	Zip	Zip	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
24	Country	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
CHILDS, WILLIE MACK 225 SW 10TH AVE SOUTH BAY FL 33493		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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COOPER, ROOSEVELT	1.2 NAME	
STREET ADDRESS	660 W 37TH ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	RIVIERA BEACH FL	1.4 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHILDS, WILLIE MACK	2.2 NAME	
STREET ADDRESS	225 SW 10TH AVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	SOUTH BAY FL	2.4 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WITCHARD, BETTY (FINAN)	3.2 NAME	
STREET ADDRESS	250 SW 7TH AVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	SOUTH BAY FL	3.4 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHILDS, LEXIE M (RODING)	4.2 NAME	
STREET ADDRESS	225 SW 10TH AVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	SOUTH BAY FL	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROKER, BERTHA M	5.2 NAME	
STREET ADDRESS	185 SW 10TH AVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	SOUTH BAY FL	5.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEWIS, PAULINE	6.2 NAME	
STREET ADDRESS	260 NW 12TH AVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	SOUTH BAY FL	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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Roosevelt Cooper **ROOSEVELT COOPER** 4/8/96 (407)842-7587
Date Daytime Phone #

CR2E037 (12/95)