## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

	MENT # N1188 VAY BAPTIST CHURCH FO			1 JAANHAN DAY HADA INTON HAMA HANN A	AL BURDY BURDY BURDY BURDY BURDY BURDY BURDY BURDY
Principal Place of Business Mailing Address					
•		13241 COMMERCE LAKES	DR		
FT. MYERS FL 33913 FT. MYERS FL 33913-7856					
US		US		3. Date Incorporated or Qualified 11/04/1985	3e. Date of Last Report 03/29/1996
2. Principal Pi	lace of Business	2a. Mailing Address	······································	4. FEI Number	Applied For
Suito Ant	# otc	Suite, Apt. #, etc.		59-2605528	Not Applicable
22	- · · · · · · · · · · · · · · · · · · ·			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State City & State				6. Election Campaign Financing	\$5.00 May Be
:3		28		Trust Fund Contribution	Added to Fees
Ζφ 	Country	Zip	Country	8. This corporation has liability for int	tangible tax under s. 199.032, Yes 🔀 No
4	9. Name and Address of Curre	29  nt Registered Agent	30	Florida Statutes  10. Name and Address of New Regi	
			81 Name		
GONZAI	LES, MARK P.		82 Street Add	leas (D.O. Bay Number in Net Assentable	
	COMMERCE LAKES DR.		52 Street Add	Iress (P.O. Box Number is Not Acceptable	*)
	RS FL 33913		83		
			84 City		85 Zip Code
				poration submits this statement for the pution's board of directors. I hereby accept	FL [ ]
SIGNATURE	Signature, typed or printed name of registered at	pent and title if applicable (NOT)	E: Registered Agent signature requ	ired when reinslating)  ADDITIONS/CHANGES TO OFFICE	DATE
INTLE	DP OF ICENS AF	DELETE	1.1 TOTLE	ADDITIONS/CITANGES TO GATICE	Change Addition
NAME	GONZALES, MARK P.		1.2 NAME		
STREET ADDRESS	13171 PARKLINE DR.		1.3 STREET ADDRESS		
City-St-ZIP	FT. MYERS FL		1.4 CITY - ST - ZIP		
TITLE	DV	DELETE	2.1 TITLE		Change Addition
AME	MARCOUX, PAUL		2.2 NAME		
STREET ADDRESS	7132 BRENTWOOD RD. S		2.3 STREET ADDRESS		
ITY-ST-ZIP ITLE	FT. MYERS FL D	DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		Change Additio
IAME	KLUGE, BILL	hand market	3.2 NAME		Free Scientific Free Location
STREET ADDRESS	3137 S.E. 22ND AVENUE		3.3 STREET ADDRESS		
CITY-ST-ZIP	CAPE CORAL FL		3.4, CITY-ST-ZIP		
TITLE	<b>T</b>	DELETE	4.1 TITLE		Change Addition
IAME	PRATHER, BETH A.		4. 2 NAME		
STREET ADDRESS	11441 WATERFORD VILLAG	e dr.	43 STREET ADDRESS		
CITY-ST-ZIP	FT. MYERS FL		4.4 CITY-ST-ZIP		
ITLE	8	DELETE	5.1 YITLE		Change  Additio
NAME	KLUGE, PAT		5.2 NAME		
TREET ADDRESS	3137 SE 22ND AVE		5.3 STREET ADDRESS		
TITY-ST-ZIP	CAPE CORAL FL	DELETE	5.4 CITY-ST-ZIP		Change Addition
TITLE		T Deteit	6.1 TITLE		L Criange L Abolito
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

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

SIGNATURE:

**FILED** 

Apr 16 1997 8:00am

Secretary of State