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**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 FEB -2 AM 8:38

DOCUMENT # N13979 (2)

1. Corporation Name
**FIRST BAPTIST CHURCH OF FOUNTAIN, FLORIDA, BAY C
OUNTY, INC.**

Principal Place of Business Mailing Address
18906 HWY. 231 18906 HWY. 231
P.O. BOX 187 P.O. BOX 187
FOUNTAIN FL 32438 FOUNTAIN FL 32438

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **03/01/1986** 3a. Date of Last Report **04/26/1994**
4. FEI Number **NOT APPLICABLE** Applied For Not Applicable
5. Certificate of Status Desired **\$6.75 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

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 **P.O. BOX 349** 27 **P.O. BOX 349**
23 City & State 28 City & State
24 Zip 25 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent
**DEGROFF, STEVEN
7313 LONE CEDAR DRIVE
YOUNGSTOWN FL 32466**

10. Name and Address of New Registered Agent
81 Name **DEGROFF, STEVEN**
82 Street Address (P.O. Box Number is Not Acceptable)
83 **16130 SANDSTONE ROAD**
84 City **FOUNTAIN, FL** 85 **32438**

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 607.0525, Florida Statutes.

SIGNATURE Steven Degroff DATE 1/26/95
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS
TITLE D
NAME CHAVERS, THOMAS
STREET ADDRESS 15529 GAINER ROAD
CITY-ST-ZIP YOUNGSTOWN FL
TITLE D
NAME DEGROFF, STEVEN
STREET ADDRESS 7313 LONE CEDAR DRIVE
CITY-ST-ZIP YOUNGSTOWN FL
TITLE D
NAME LONGWITH, BOBBY
STREET ADDRESS 11802 IVYDELL STREET
CITY-ST-ZIP FOUNTAIN FL
TITLE DP
NAME TESENIAR, CHRIS W.
STREET ADDRESS 13806 E. HWY. 20
CITY-ST-ZIP YOUNGSTOWN FL 32466
TITLE D
NAME HAZELIP, HAROLD
STREET ADDRESS 17913 PARK PLACE
CITY-ST-ZIP FOUNTAIN FL
TITLE S
NAME DEGROFF, DAWN
STREET ADDRESS 7313 LONE CEDAR DR.
CITY-ST-ZIP YOUNGSTOWN FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE Change Addition
2.2 NAME **D DEGROFF, STEVEN**
2.3 STREET ADDRESS **16130 SANDSTONE ROAD**
2.4 CITY-ST-ZIP **FOUNTAIN, FL. 32438**
3.1 TITLE Change Addition
3.2 NAME **D DAVIS, DENNIS**
3.3 STREET ADDRESS **17215 HWY. 231**
3.4 CITY-ST-ZIP **FOUNTAIN, FL. 32438**
4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE Change Addition
5.2 NAME **D GOODWIN, RONALD**
5.3 STREET ADDRESS **RT. 1 BOX 251 GOODWIN RD.**
5.4 CITY-ST-ZIP **ALPHA, FL. 32421**
6.1 TITLE Change 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)(4), 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: Thomas Chavers DATE 1-26-95 904 769-3919
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR