FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

N24895

(7)

N.C.B	.C. FOUNDATION, INC.								
Principal Place	e of Business	Mailing Address					Ailt Bidii Aidii Aigii Bid		
518 N.W. 14TH AVENUE 518 N.W. 14TH AVENU GAINESVILLE FL 32601-4213 GAINESVILLE FL 32601									
						3. Date incorporated or Qualified 02/18/1988	3a. Date of Last 04/12/		
2. Principal P	lace of Business	2a. Mailing Address 26				4. FEI Number Applied For NOT APPLICABLE Not Applied For		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State			Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees			
Zip 24	Country 25	Zip 29	Country 30		ļ	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No			
	9. Name and Address of Currer		1001			0. Name and Address of New Re			
			- 1	Name	1		<u> </u>		
BEVILLE, EDGAR						LOYD E JONES III			
	W 108TH STREET			32 Street		P.O. Box Number is Not Acceptable NW 14 AVENUE)		
	SVILLE FL 32606		ļī.	33	210	MI 14 AVENUE			
	7.000						r		
			1	Gity	GAIN	RESVULLE	FL 85 3	p Code 2601	
11. Pursuant	to the provisions of Sections 617.0502	2 and 617 1508, Florida Stat	utes, the abov	e-named c	corporation	submite this statement for the nurn	oso of changing its	ragistared office	
or registe	red agent, or both, in the State of Flori ith, and accept the obligations of, Seci	ida. Such chanoe was authoi	rized by the co	rporation's	s board of	directors. I hereby accept the appoint	ntment as registered	Jagent. I am	
	ini, and accept the congations of, deci	JOHO 17 JOSOO, FIORIDA GLATUR	to.						
SIGNATURE	Signature, typed or printed name of registered agent	t and fide if applicable (NOTE Registered A	gent signature	required whe	renstating)	DATE		
12.	OFFICERS AND DIRECTORS		13.	3. ADD TIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			DRS IN 12		
TITLE	D	DELETE	1.1 TITL	E	P/1	P/D (Mange Addition		☐ Addition	
NAME	PALMER, ZANE		1.2 NAN	1E	,	•			
STREET ADDRESS	8811 SW EIGHTH AVENUE		1.3 STR	EET ADDRESS					
CITY-ST-ZIP	GAINESVILLE FL		1.4 CITY	'-ST-ZIP					
TITLE	D	∏ DELETE.	2 1 TITL	F	В	B XX Change ∏ Ai XXXXXXXXXXXXX		☐ Addition	
NAME	PENDLE, BILL		2 2 NAM	1E	XXXX				
STREET ADDRESS	4400 N.W. 13TH AVENUE		2.3 STR	EET ADDRESS	1	KK KIKK KAKA KAKIK			
CITY - ST - ZIP	GAINESVILLE FL		2 4 CIT	Y - ST - ZIP		NESYNLLEX X FILX X			
TITLE	D	DELETE	3.1 TITL	E	V/D		Change	Addition	
NAME	BEVILLE, EDGAR		3.2 NAM	1E	LL	Clemons			
STREET ADDRESS	4517 NW 108TH STREET		3.3 STA	EET ADDRESS	1913	1 NW 97 ST			
CITY - ST - ZIP	GAINESVILLE FL		3.4 C·1	Y-ST ZIP	Gair	nesville, FL			
TITLE		DELETE	4 1 TIFL	E	T/D	,	☐ Change	Addition	
NAME			4 2 NA	ИE	1 -	Branch		••	
STREET ADDRESS			4 3 STR	EET ADDRESS	1	35 N State Rd 121			
CITY-ST-ZIP			4.4 CITY	ST-ZIP		nesville. Fl			
TITLE	-	DELETE	51 TIFL		S/D	•	Change	X Addition	
NAME			5.2 NAN		1 '	l Waters			
STREET ADDRESS			5 3 STR	EFT ADDRESS		5 NE 156 AVE			
CITY-ST-ZIP				-ST-ZIP	Gair	nesville, Fl	· · · · · · · · · · · · · · · · · · ·		
TITLE		DELETE	61) ITL		D	•	Change	Addition	
NAME			6 2 NAN		Jeri	re Brainen			
STREET ADDRESS				EE1 ADDRESS	1	NW 21 Ave			
CITY-ST-ZIP			E & DeTA	- ST - 7:P	∃ Gair	nesville FL			

14. Ido 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:

William M. Weldon SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Zane Palmer 3/6/96 Day5me Phone #

North Central

BAPTIST CHURCH

518 N.W. 14th Avenue Gainesville, FL 32601-4299 (904) 373-3341 Fax (904) 373-3343

March 6, 1996

Addition to Directors for Document # N24895 N.C.B.C. Foundation, Inc. 518 NW 14 Ave Gainesville, Fl 32601

DR. LLOYD JONES
Pastor

GREG HOCHSTETLER Associate Pastor Music & Media

> FRED SLOAN Associate Pastor Senior Adults

item #13

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Addition

Wayne Cheshire 3923 SW 20 St Gainesville, FL

Zane Palmer 3/6/96