

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 # **N29527** (1)

1. Corporation Name
YOUNGSTOWN BAPTIST CHURCH, INC.



Principal Place of Business Mailing Address
C/O WILLIAM PLAZARIN
11335 FIRST STREET (P.O. BOX 229)
YOUNGSTOWN FL 32466-2510

3. Date Incorporated or Qualified **12/02/1988** 3a. Date of Last Report **07/07/1995**

2. Principal Place of Business 21 12417 Hwy 231 Suite, Apt. #, etc. 22 YOUNGSTOWN, FL City & State 23 32466 Zip 24 FL Country	2a. Mailing Address 25 P.O. Box 229 Suite, Apt. #, etc. 26 YOUNGSTOWN, FL City & State 27 32466 Zip 28 FL Country	4. FEI Number 59-2827373 Applied For Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent ARNOLD, OLIVER W. 12401 HIGHWAY 231 YOUNGSTOWN FL 32466	10. Name and Address of New Registered Agent B1 Name Henry Gilliland B2 Street Address (P.O. Box Number is Not Acceptable) 10616 Floyd Lane B3 Youngstown, FL 32466 B4 City FL B5 Zip Code
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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 *Henry Gilliland* **Henry Gilliland** 1-21-96
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ARNOLD, OLIVER W. 12401 HIGHWAY 231 YOUNGSTOWN FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	T.T. Boswell 12417 Hwy 231 Youngstown FL 32466
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HACHMEISTER, JOHN RT. B, BOX 2406 YOUNGSTOWN FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HACHMEISTER, TONI D. RT. B, BOX 2406 YOUNGSTOWN FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GILLILAND, HENRY 10616 FLOYD LANE YOUNGSTOWN FL	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEACOCK, ROY D. 12036 VEAL ROAD PANAMA CITY FL	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PAS PLAZARIN, WILLIAM 11335 1ST STREET YOUNGSTOWN FL	6.1 TITLE 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 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: *Henry Gilliland* **Henry Gilliland** 1-21-96
(Signature and typed or printed name of signing officer or director) Daytime Phone #

CR2E037 (12/95)