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Feb 13 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N36290

(7)

1. Corporation Name

AVONDALE BAPTIST CHURCH CORPORATION



Principal Place of Business

Mailing Address

Avondale Baptist Church
C/O FREDERICK R. BROCK
1824 DONALD STREET
JACKSONVILLE FL 32205C/O FREDERICK R. BROCK
1824 DONALD STREET
JACKSONVILLE FL 32205-91013. Date Incorporated or Qualified
01/25/19903a. Date of Last Report
03/06/1996

2. Principal Place of Business

2a. Mailing Address

21 Avondale Baptist Church

2a. Avondale Baptist Church

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 3519 Herschel St

27 3519 Herschel St

City & State

City & State

23 Jacksonville, Fla

28 Jacksonville Fla

Zip

Country

Zip

Country

24 32205

25

29 32205

30

4. FEI Number
59-0873829Applied For
☒ Not Applicable5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BROCK, FREDERICK R.
1824 DONALD STREET
JACKSONVILLE FL 32205

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, 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Frederick R Brock

1/25/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE
NAME BARBER, JAMES C.
STREET ADDRESS 6346 MONTROSE AVE. NORTH
CITY - ST - ZIP JACKSONVILLE FL1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIPTITLE TD ☐ DELETE
NAME GANEY, HARRY D.
STREET ADDRESS 4979 WATER OAK LANE
CITY - ST - ZIP JACKSONVILLE FL2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIPTITLE SD ☐ DELETE
NAME DAVIS, JACKIE
STREET ADDRESS 4165 SAN JUAN AVENUE
CITY - ST - ZIP JACKSONVILLE FL3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIPTITLE VD ☐ DELETE
NAME WILLIAMS, STAMIE D.
STREET ADDRESS 1823 MEMORY LANE
CITY - ST - ZIP JACKSONVILLE FL4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIPTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIPTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP6.1 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 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:

HARRY D. GANEY HARRY D. GANEY

TREASURER

1/29/97 904-388-4804

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone 904-388-4804

CR2E037 (9/96)