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Feb 28 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N39313 (4)

1. Corporation Name

FIRST BAPTIST CHURCH OF EAST PALATKA, INC.

Principal Place of Business

Mailing Address

C/O VIVIAN BOBBITT
P.O. BOX 404
EAST PALATKA FL 32131
US

C/O VIVIAN BOBBITT
P.O. BOX 404
EAST PALATKA FL 32131-0404
US

3. Date Incorporated or Qualified
07/26/1990

3a. Date of Last Report
03/11/1996

4. FEI Number
59-3022421

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

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 FIRST BAPTIST CHURCH OF EAST PALATKA

26 P.O. Box 404

Suite, Apt. #, etc

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29 32131

30

FL

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BOBBITT, VIVIAN L.
108 BROWNING LANE
EAST PALATKA FL 32131

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, 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 VIVIAN L BOBBITT

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

(NOTE: Registered Agent signature required when reinstating)

Jan 25-1997
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE TPD
NAME POLK, WILLARD
STREET ADDRESS RT. 1, BOX 442
CITY-ST-ZIP EAST PALATKA FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE TVD
NAME MCDANIEL, FRANK
STREET ADDRESS 109 RIVER TERRACE
CITY-ST-ZIP EAST PALATKA FL 32131

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE TSD
NAME BOBBITT VIVIAN L
STREET ADDRESS 108 BROWNING LANE
CITY-ST-ZIP EAST PALATKA FL 32131

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

OSCAR Lee Could Well Jr
569 HWY 100
PALATKA, FL 32177
MAILING ADDRESS
RT 1 BOX 2815
PALATKA FL 32131

GARY Bruce STROMINGER
6323 COUNTY ROAD 13 SOUTH
HASTINGS FL 32145

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: VIVIAN L BOBBITT - VIVIAN L BOBBITT

Jan 25-1997 (904) 325-5380
Date Daytime Phone 0002718

CR2E037 (9/96)