

# 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 #** N41700

(8)

**1. Corporation Name**  
EAST HILL BAPTIST CHURCH OF PENSACOLA, INC.

**Principal Place of Business**

C/O E. MELTON DEASON  
1301 E. GADSDEN STREET  
PENSACOLA, FL 32501

**Mailing Address**

C/O E. MELTON DEASON  
1301 E. GADSDEN STREET  
PENSACOLA, FL 32501

**3. Date Incorporated or Qualified**  
01/16/91

**3a. Date of Last Report**  
1-25-95

**2. Principal Place of Business**

**2a. Mailing Address**

**21** Suite, Apt. #, etc.

**26** Suite, Apt. #, etc.

**22** City & State

**27** City & State

**23** Zip

Country

**28** Zip

Country

**24** Zip

**25**

**29**

**30**

**4. FEI Number**  
59-0934332

**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

**9. Name and Address of Current Registered Agent**

DEASON, E. MELTON  
1301 E. GADSDEN STREET  
PENSACOLA, FL 32501

**10. Name and Address of New Registered Agent**

**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**

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

(NOTE: Registered Agent signature required when reinstating)

**DATE**

**12. OFFICERS AND DIRECTORS**

**TITLE** D ☐ DELETE  
**NAME** LEONARD, MARY JANE  
**STREET ADDRESS** 537 BRENT LANE  
**CITY-ST-ZIP** PENSACOLA FL 32503

**TITLE** D ☐ DELETE  
**NAME** JOHNSTON, F. H.  
**STREET ADDRESS** 501 KENILWORTH AVE.  
**CITY-ST-ZIP** GULF BREEZE, FL 32561

**TITLE** D ☐ DELETE  
**NAME** NOLAN, EARLENE  
**STREET ADDRESS** 2300 AEGEAN TERRACE  
**CITY-ST-ZIP** PENSACOLA, FL 32503

**TITLE** D ☐ DELETE  
**NAME** STRASSER, K. JG  
**STREET ADDRESS** 1920 E. LLOYD STREET  
**CITY-ST-ZIP** PENSACOLA, FL 32503

**TITLE** D ☐ DELETE  
**NAME** WALDON, DOT  
**STREET ADDRESS** 3503 TIBET DRIVE  
**CITY-ST-ZIP** GULF BREEZE, FL 32561

**TITLE** ☐ DELETE  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

☐ Change ☐ Addition

**1.1 TITLE**

**1.2 NAME**

**1.3 STREET ADDRESS**

**1.4 CITY-ST-ZIP**

**2.1 TITLE**

**2.2 NAME**

**2.3 STREET ADDRESS**

**2.4 CITY-ST-ZIP**

**3.1 TITLE**

**3.2 NAME**

**3.3 STREET ADDRESS**

**3.4 CITY-ST-ZIP**

**4.1 TITLE**

**4.2 NAME**

**4.3 STREET ADDRESS**

**4.4 CITY-ST-ZIP**

**5.1 TITLE**

**5.2 NAME**

**5.3 STREET ADDRESS**

**5.4 CITY-ST-ZIP**

**6.1 TITLE**

**6.2 NAME**

**6.3 STREET ADDRESS**

**6.4 CITY-ST-ZIP**

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☐ Change ☐ Addition

**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:**

*E. Melton Deason*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-96

Date

(904)433-0095

Daytime Phone #

CR2E037 (12/95)