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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT



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

1997/1998

DOCUMENT # N41700 (8)

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

Principal Place of Business Mailing Address
C/O E. MELTON DEASON 1301 E GADSDEN ST. PENSACOLA FL 32501
C/O E. MELTON DEASON 1301 E GADSDEN ST. PENSACOLA FL 32501-4204

3. Date Incorporated or Qualified 01/16/1991
3a. Date of Last Report 06/04/1996

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 25 29 30
4. FEI Number 59-0934332 Applied For Not Applicable
6. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing \$5.00
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 ST. 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 LN
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 TERR
CITY-ST-ZIP PENSACOLA FL 32503
TITLE D [] DELETE
NAME STRASSER, JAK
STREET ADDRESS 1920 E. LLOYD ST.
CITY-ST-ZIP PENSACOLA FL 32503
TITLE D [] DELETE
NAME WALDON, BONT DOT
STREET ADDRESS 3503 TIBET DR
CITY-ST-ZIP GULF BREEZE FL 32561
TITLE [] DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE [] Change [] Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE [] Change [] Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE [] Change [] Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE [] Change [] Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE [] Change [] Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 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: Xc Mel Deason

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