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FILED

Feb 04 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N42632 (2)

1. Corporation Name

RAMONA BOULEVARD BAPTIST CHURCH, INC.

Principal Place of Business

Mailing Address

5335 RAMONA BLVD.
JACKSONVILLE FL 322055335 RAMONA BLVD.
JACKSONVILLE FL 32205-44143. Date Incorporated or Qualified
03/20/19913a. Date of Last Report
03/12/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

4. FEI Number
59-2354439Applied For
Not Applicable

5. 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

MCINTYRE, HOWARD
5335 RAMONA BLVD
SUITE 125
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, 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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE T
NAME WHITFIELD, J.M.
STREET ADDRESS 8415 SAN MARTARRO DR. W.
CITY-ST-ZIP JACKSONVILLE FL 32217
Title changed →1.1 TITLE D. S/T
1.2 NAME Whitfield, J. M.
1.3 STREET ADDRESS 8415 San Martarro Dr. W.
1.4 CITY-ST-ZIP Jacksonville, FL 32217
Change AdditionTITLE T
NAME NETTLES, DAN
STREET ADDRESS 1043 ODESSA DRIVE WEST
CITY-ST-ZIP JACKSONVILLE FL 32254
DELETE2.1 TITLE D. P.
2.2 NAME McIntyre, Howard L.
2.3 STREET ADDRESS 8039 Cumberland Gap Trail N.
2.4 CITY-ST-ZIP Jacksonville, FL 32244
Change AdditionTITLE T
NAME DELL, CHARLES
STREET ADDRESS 8883 MARIETTA MEADOWS CT
CITY-ST-ZIP JACKSONVILLE FL 32220
DELETE3.1 TITLE D. V.
3.2 NAME HALL, Steven R.
3.3 STREET ADDRESS 3674 San Viscaya Dr.
3.4 CITY-ST-ZIP Jacksonville, FL 32217
Change AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DELETE4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
Change AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DELETE5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
Change AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DELETE6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
Change Addition

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:

HOWARD
McIntyre / 12/97

Date

904/781/9655

Daytime Phone 8004669

CR2E037 (9/96)