

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR 14 AM 9:44

DOCUMENT # N44493

(7)

1. Corporation Name

RIVERSIDE GARDENS BAPTIST CHURCH, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

507 CASSAT AVENUE
JACKSONVILLE FL 32254
US

507 CASSAT AVENUE
JACKSONVILLE FL 32254
US

3. Date Incorporated or Qualified

07/30/1991

3a. Date of Last Report

02/18/1994

4. FEI Number

59-3093617

Applied For

Not Applicable

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

25

29

30

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)

☒

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 189.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

REV. JOSEPH L. GIFFIN
2745 OAK STREET, APT 3
JACKSONVILLE FL 32205

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

1057 CONGLETON TERRACE

83

84 City

JACKSONVILLE FLORIDA FL

85 Zip Code

32205

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

* SIGNATURE

Rev. Joseph L. Giffin

(NOTE: Registered Agent signature required when reappointing)

April 10, 1995

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	CD
NAME	GIFFIN, JOSEPH L.
STREET ADDRESS	2745 OAK STREET, APT. 3
CITY - ST - ZIP	JACKSONVILLE FL 32205
TITLE	D
NAME	HARNAGE, GERALD
STREET ADDRESS	4842 ROSSELLE STREET
CITY - ST - ZIP	JACKSONVILLE FL 32254
TITLE	STD
NAME	GIFFIN, BERT
STREET ADDRESS	2637 BEAVERBROOK PLACE (Decensed 3-6-95)
CITY - ST - ZIP	JACKSONVILLE FL 32254
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	1057 CONGLETON TERRACE
1.4 CITY - ST - ZIP	JACKSONVILLE, FLORIDA 32205
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	STD
3.3 STREET ADDRESS	JAMES VAN NOORDT
3.4 CITY - ST - ZIP	5121 COLUMBUS AVENUE JACKSONVILLE, FLORIDA 32254
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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(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:

Rev. Joseph L. Giffin

April 9, 1995

(904) 387-3307

SIGNATURE AND TITLED OR PRINTED NAME OF REGISTERED AGENT OR DIRECTOR

Rev. Joseph L. GIFFIN