

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995
AMOUNT DUE ON OR BEFORE 8/9/95: \$155 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$300)

NONPROFIT
CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # N46093

(3)

1. Corporation Name

BAPTIST BUILDERS, INC.

FILED

1995 JUL 13 AM 9:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

2024 COOPER DR
COCOA FL 32922

2024 COOPER DR
COCOA FL 32922

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/19/1991

3a. Date of Last Report

02/03/1994

4. FBI Number

59-3085259

Applied For

Not Applicable

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)

☐

FILING FEE IS
\$61.25

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 721 RIDGEWOOD AVE.

26 721 RIDGEWOOD AVE.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 HOLLY HILL, FL.

27 City & State

28 HOLLY HILL, FL.

24 Zip

32117

Country

25 FLORIDA

29 Zip

32117

Country

30 FLORIDA

9. Name and Address of Current Registered Agent

TOWNER, WILLIAM

2024 COOPER DR

COCOA FL 32922

10. Name and Address of New Registered Agent

81 Name

WILLIAM TOWNER

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

721 RIDGEWOOD AVE.

83

84 City

HOLLY HILL

FL

85 Zip Code

32117

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

Charles William Towner

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

NAME

STREET ADDRESS

CITY - ST - ZIP

DPV
TOWNER, C.W.
2024 COOPER DRIVE
COCOA FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

S
TOWNER, E.J.
2024 COOPER DRIVE
COCOA FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

T
TOWNER, C.W.
2024 COOPER DRIVE
COCOA FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D
TOWNER, C.W. SR.
4526 SW 47TH WAY
GAINESVILLE FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

☐ Change ☐ Addition

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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:

Charles William Towner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8 July 95

Date

904 248 3163

Daytime Phone #

CR2E037 (3/95)