NONPROFIT CORPORATION **ANNUAL REPORT**



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

1996

DOCUMENT #
1. Corporation Name N49194

(6)

FAITH BAPTIST FELLOWSHIP OF ATLANTIC BEACH, INC.

| Principal Place of Business Mailing Address | | | | | | | | | FORMUL DIN ENDSE VENDL MUHD | IONN ENGN EIGH EIGH | JANI UIBII U | | |
|---|----------------------------------|----------------------------|---|---|--|------------------------------------|----------------------------|---|---|--------------------------------------|----------------------------|--------------------------------|--|
| | 741 BRAZEAL Atlantic be Us | | 2233 | 2073 MAYPORT RD. ATLANTIC BEACH FL 32233 US | | | | | | | | | |
| | | | | | | | | | corporated or Qualified 6/02/1992 | | of Last Re 4/19/19 | | |
| 2. | Principal Pla | ce of Busi | ness | 2a. Mailing A | ddress | | | 4. FEI Nu | | | Αρ | oplied For | |
| 21 | 739 | Braz | eale Lane | 26 2073 | Mayı | ort R | d | 5 | 9-3125965 | | No | ot Applicable | |
| 22 | Suite, Apt. # | , etc. | | Suite, Ap | t. #, etc. | | | 5. Certific | ate of Status Desired | | \$ 8.75 / Fee Re | Additional aquired | |
| | City & State | | | City & Sta | ate | | | 6. Electio | n Campaign Financing | | \$5.00 | May Re | |
| 23 | λtlan | tic | Beach, F1. | 28 Atla | ntic | Beach | P1_ | Trust F | und Contribution | Ш | Added t | | |
| | Zip | | Country | | | | | 1 | prporation has liability for | _ ~ _ | | 99.032, | |
| 24 | 3223 | | 25 US e and Address of Curre | 29 322 | | 30 | US | | Statutes and Address of New | ☐ Yes K N | | | |
| - | | 9. (44) | e Bild Addiess of Colle | it negistered Age | —————————————————————————————————————— | | 81 Name | | BIO AUGIESS OF INST | negistered Ag | | | |
| | EU HINGE | D CHAI | HEC DAREDT | | | H. W. GROI Number is Not Accept | RGE | | | | | | |
| FILLINGER, CHARLES ROBERT 429 AQUATIC DIVE | | | | | | | | : Address (P.O. Box !073 MAYP | | able) | | | |
| ATLANTIC BEACH FL 32233 | | | | | | | 83 | W/JAAIF | URI RU. | | | | |
| | | | | | | - | 84 City | | <u> </u> | | 85 Zip (| Code | |
| | | | | | | | | ATLANTIC | | <u> </u> | | 2233 | |
| <u>'</u> '' | or registere | o tne provi ed agent, c | sions of Sections 617.050; or both, in the State of Flori ept the obligations of, Sec | 2 and 617,1508, Fil ida. Such change v | onda Statu vas authori | tes, the above zed by the c | ve∙named c orporation's | corporation submits s board of directors | this statement for the p Thereby accept the ap | ourpose of chang opointment as re | ing its reg gistered a | jistered office igent. I am | |
| | familiar with | n, and acc | ept the obligations of, Sec | tion 617.0503, Flori | ida Statute | W. 2 | 191 | 10 1 | 11 | | | _ | |
| SI | GNATURE _ | Storiature type | GEORGE HIGH: ad or printed name of registered agen | SMITH_(R | Ne Z | OTE Registered | Agent signature | Control when reinstating | ch i | APRIL 29 |),1 <u></u> | 996 | |
| 1: | | | | ND DIRECTORS | | 1 43. | t | · · · · · · · · · · · · · · · · · · · | ONS/CHANGES TO C | FFICERS AND D | BECTOR | S IN 12 | |
| TIT | LE | D | | - | DELETE | 1.1 TIT | l£ | P | | ₩ | Change | ☐ Addition | |
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| \$1 | REET ADDRESS | | QUATIC DRIVE | | | 1.3 \$7 | REET ADDRESS | | AYPORT RD | | | | |
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| TIT | | TD | | * | DELETE | 2 1 11 | | WD. | | ₩ | change | ☐ Addition | |
| | .ME | | N, WANDA J | | | 2 2 NA | | REMOU | Y, FRANK | P | | | |
| ı | REET ADDRESS | – | RAZEALE LANE | | | | REET ADDRESS | | SPEN CT. | | | | |
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| NA | ì | _ | IS, ANDREW | X | DELETE | 3 2 NA | | SABRE | , SAMUEL | × | Oria-igc | ☐ Addition | |
| | REET ADDRESS | | EUNICE ROAD | | | | reet address | 2630 | ST. RD. A | 1 A | | | |
| l | IY-ST-ZIP | – . | SONVILLE FL | | | | TY-ST-ZIP | ATLAN | TIC BEACH | FL. 32 | 233 | | |
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| NA. | .ME | HIGHS | SMITH, GEORGE | | | 4. 2 N/ | AME | SPEARS | , JOHN W | | | | |
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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 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: JOHN W SPEARS (T)

NEGUE APRIL 29, 1996
Daytine Phone