

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR -9 AM 9:10

DOCUMENT # N93000003497 (5)

1. Corporation Name

FIRST FILIPINO BAPTIST CHURCH, INC.

Principal Place of Business

6915 BERNAY AVENUE
JACKSONVILLE FL 32205

Mailing Address

6915 BERNAY AVENUE
JACKSONVILLE FL 32205

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/08/1993

3a. Date of Last Report

08/03/1994

4. FEI Number

59-3024281

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒

\$68.75 Supplemental
Fee Not Required

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

3846 HARTLEY RD.

2a. Mailing Address

26

3846 HARTLEY RD

Suite, Apt. #, etc.

City & State

23 JACKSONVILLE, FL.

City & State

28 JACKSONVILLE, FL.

Zip

24 32257

Country

25 USA

Zip

29 32257

Country

30 USA

9. Name and Address of Current Registered Agent

MYHRE, DANIEL
6915 BERNAY AVENUE
JACKSONVILLE FL 32205

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 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

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reconstituting)

DATE

12. OFFICERS AND DIRECTORS

TITLE DT
NAME DYER, CHARLES R
STREET ADDRESS 4527 JULINGTON CREEK ROAD
CITY-ST-ZIP JACKSONVILLE FL

TITLE DT
NAME VINCENTE, LEONARD
STREET ADDRESS 2708 LIBERTY LANE
CITY-ST-ZIP JACKSONVILLE FL

TITLE DT
NAME GONZALEZ, ERIBERTO
STREET ADDRESS 10335 TRIPLE CROWN AVENUE
CITY-ST-ZIP JACKSONVILLE FL

TITLE DT
NAME MARTIN, DANILO
STREET ADDRESS 12520 WILLOUGHBY LANE
CITY-ST-ZIP ATLANTIC BEACH FL

TITLE DT
NAME BAUTISTA, CONNIE
STREET ADDRESS 2650 DEBBIE COURT
CITY-ST-ZIP JACKSONVILLE FL

TITLE
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

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

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 R Dyer CHARLES R. DYER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

19 FEB 95 16965097
Date Date