

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

FILED
May 15 1997 8:00am
Secretary of State

DOCUMENT # N93000004034 (5)

1. Corporation Name

FIRST BAPTIST CHURCH OF INDIAN LAKE ESTATES, INC



Principal Place of Business

Mailing Address

HIGHWAY 60 EAST
INDIAN LAKE ESTATES FL 33855

P.O. BOX 7668
INDIAN LAKE ESTATES FL 33855-7668

3. Date Incorporated or Qualified
09/07/1993

3a. Date of Last Report
04/26/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number
59-3206149

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

8. 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

MILLS, GEORGE R
14 N. PALMETTO
INDIAN LAKE ESTATES FL 33855

81 Name
Swicegood, Charles

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

83

84 City
Indian Lake Estates FL

85 Zip Code
33855

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 Swicegood* Charles Swicegood

4-18-97

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 PT DELETE
NAME MILLS, GEORGE R
STREET ADDRESS 14 PALMETTO N.
CITY-ST-ZIP INDIAN LAKE ESTATES FL 33855

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE D DELETE
NAME SWICEGOOD, CHARLES
STREET ADDRESS 20 S. PALMETTO
CITY-ST-ZIP INDIAN LAKE ESTATES FL

2.1 TITLE PT Change Addition
2.2 NAME SWICEGOOD CHARLES
2.3 STREET ADDRESS 20 PALMETTO SOUTH
2.4 CITY-ST-ZIP INDIAN LAKE ESTATES, FL 33855

TITLE D DELETE
NAME GROOMS, JOHN
STREET ADDRESS 824 INDIAN LAKE DRIVE
CITY-ST-ZIP INDIAN LAKE ESTATES FL

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE T DELETE
NAME SWICEGOOD, CAROLYN
STREET ADDRESS 20 PALMETTO S.
CITY-ST-ZIP INDIAN LAKE ESTATES FL 33855

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE D Change Addition
5.2 NAME TAYLOR, DORIS
5.3 STREET ADDRESS #5 LAGUNA
5.4 CITY-ST-ZIP INDIAN LAKE ESTATES, FL. 33855

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE D Change Addition
6.2 NAME SMITH, CLAUDE
6.3 STREET ADDRESS 212 PARK AVE
6.4 CITY-ST-ZIP INDIAN LAKE ESTATES, FL. 33855

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: *Carolyn Swicegood* CAROLYN SWICEGOOD, Treasurer-Director, 4-18-97

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0053993

CR2E037 (9/96)