## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # N93000004224 (2)

WALNUT STREET BAPTIST CHURCH, INC.

Principal Place of Business

Mailing Address

602 WALNUT ST ACKSONVILLE FL 32206 1602 WALNUT ST

JACKSONVILLE FL 32206-4641

## FILED Apr 14 1997 8:00am Secretary of State

|--|--|

					3. Date Incorporated or Qualified 09/17/1993	3a. Date of Last Rep 05/17/1996	ort	
2. Princip	al Place of Business	usiness 2a. Mailing Address 26			4. FEI Number Applied For S9-2979069 Not Applicable			
Sulte, A	Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired See Required Fee Required			
City & :	State	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution  Added to Fees			
Zip	Country	Zip	Country		6. This corporation has liability for intangible tax under s. 199.032,			
24	25 9. Name and Address of Curre	29 29 Agent	30		Florida Statutes Yes No  10. Name and Address of New Registered Agent			
			81	Name				
BOLAND, JOHN W					82 Street Address (P.O. Box Number is Not Acceptable)			
1842 WALNUT ST.					oz Street Address (F.O. Box Number is Not Acceptable)			
JACKS	ONVILLE FL 32206		83					
	•		84	City		85 Zip Co	de	
44 6		00 - 1047 4500 Ft 14 00 A		-				
office	or registered agent, or both, in the State	02 and 617.1508, Florida Statu o of Florida. Such change was	authorized by	⊩nameα co the corpor	rporation submits this statement for the puration's board of directors. I hereby accept	pose of changing its re the appointment as re	egistered   gistered	
		gations of, Section 617.0503, F	lorida Statutes	•				
SIGNATUR	Signature, typod or printed name of registered ac	rent and title if applicable (NC	TE Registered Ager	nt signature req	Uired when reinstaling)	DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS	IN 12	
TITLE	D	☐ DELETE	1.1 TITLE			Change	Addition	
NAME	BOLAND, JOHN W		1.2 NAME					
STREET ADDRE			1.3 STREET	ADDRESS			ļ	
CITY-ST-ZIP	JACKSONVILLE FL 32206		1.4 CITY-ST	1-2IP				
TITLE	D	☐ DELETE	2.1 TITLE			☐ Change [	Addition	
NAME			2.2 NAME					
STREET ADDRE				ADDRESS			ļ	
CITY-ST-ZIP	JACKSONVILLE FL 32207	I printe	2 4 CITY-S	T-ZIP		Change	Addition	
TITLE	D ANOTIA F	☐ DETEJE	3.1 TITLE			□ Change [	Addition [	
NAME	BOLAND, ANGELA F		3.2 NAME					
STREET ADDRE	ISS   1642 WALNUT ST JACKSONVILLE FL 32206		3.3 STREET	- 1				
CITY-ST-ZIP	JACKSONVILLE FL 32200	DELETE	3.4. DITY-S	I-ZIP		Change	Addition	
NAME	1	section	4. 2 NAME			vgv L		
STREET ADDRE	es l		4.3 STREE1	ADDRESS	·			
CITY-ST-ZIP			4.4 CITY - S1					
TITLE			5.1 TITLE			☐ Change	Addition	
NAME			5.2 NAME	1			İ	
STREET ADDRE	ss		5.3 STREET A	ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST	- ZIP				
TITLE		☐ DELETE	6.1 TITLE	7		Change	Addition	
NAME			6.2 NAME					
STREET ADDRE	ss		6.3 STREET /	ADDRESS			ļ	
CITY-ST-ZIP			6.4 CHTY - ST		·			
14. I do he	ereby certify that the information supplies	ed with this filing does not qual	lify for the exer	nption state	ed in Section 119.07(3)(i), Florida Statutes.	I further certify that the	)	

4. 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.

MANAGER P. AMERICA DE MERCHETTA DE LA MARIA TOTAL DE