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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N9400000091 (8)

FIRST BAPTIST CHURCH OF CANDLER, INC.

Principal Place of Business Mailing Address

FILED Feb 28 1997 8:00am Secretary of State



0121 SE 111TH COURT PO BOX 457 CANDLER FL 32111-0457 US US					Date incorporated or Qualified	3a. Date of	Last Report
					01/07/1994	02/16/	
2. Principal F	Place of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number 59-3128840		Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				60	.75 Additional
22		27			5. Certificate of Status Desired		ee Required
City & Sta	te	City & State		***************************************	6. Election Campaign Financing		5.00 May Be
Zip	Country	28 Zip	Count	trv	Trust Fund Contribution		dded to Fees
24	25	29	30	.,	8. This corporation has liability for i	ntarigible tayui Yes 👿 No	nder 8. 199.032,
	9. Name and Address of Curre		1001		10. Name and Address of New Re		
			8	1 Name	***************************************		
PEACH, J	IOE E		l s	2 Street Add	dress (P.O. Box Number is Not Acceptab	le)	
10121 SE			0,100,710	Too (To. Box (To) I box (To) To)			
OCALA F	L 34472		8	13			
			Ë	4 City		- 85	Zip Code
						FL	
office or	registered agent, or both, in the Stat	te of Florida. Such change was	authorized	hy the cornors	rporation submits this statement for the p ation's board of directors. I hereby accep	urpose of chan of the appointm	ging its registered ent as registered
agent. La	am familiar with, and accept the obli	gations of, Section 617.0503	orida Statut	les//	7		
SIGNATURE	Signature typed or printed name of registered a	ACIT Ga	e 7.	Gench	<u> </u>	18-97	7
12.		ND DIRECTORS	13.	Geut signature ted	uired when reinstaling) ADDITIONS/CHANGES TO OFFICE	ERS AND DIRE	CTORS IN 12
TITLE	DP	DELETE	1.1 TOTAL	E	7.0017.010,011.010.010.011.0	□ c	
NAME	PRITCHETT, RAYMOND		1,2 NAM	ie			• —
STREET ADDRESS	10092 SE 111TH CT		1.3 STRI	EET ADDRESS			
CITY - ST - ZIP	OCALA FL 34472			-ST-ZIP			
TITLE	DVP	☐ DELETE	2.1 TITL			□ c	hange Addition
NAMÉ	PEACH, TWILA		2.2 NAM	IE .			
STREET ADDRESS	10121 SE 111TH COURT		2.3 STR	EET ADDRESS			
CITY-ST-ZIP	OCALA FL		2. 4 CIT	Y-ST-ZIP			
TITLE	DS	☐ DELETE	3.1 TITL	E		□ c	hange 🔲 Addition
NAME	PRITCHETT, FLORENCE		3.2 NAM)E			
STREET ADDRESS	10092 SE 111TH COURT		3.3 STR	EET ADDRESS			
CITY - ST - ZIP	OCALA FL			7-5T-ZIP		——————————————————————————————————————	
TITLE	DT	☐ DELETE	4.1 TITL	· }		□ 0	hange L. Addition
NAME	BAKER, GRACE		4. 2 NAM	_			
STREET ADDRESS	16847 NE 16TH PLACE			ET ADDRESS			
CITY-ST-ZIP	SILVER SPRINGS FL	☐ DELETE		-ST-ZIP		□ c	hange Addition
TITLE		☐ street	5.1 TITLI 5.2 NAM			L., C	manific First Modellox
STREET ADDRESS							
				EET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	5.4 CHY 6.1 TITL	-ST-ZIP	······································	c	hange Addition
NAME		hand Openit	6.2 NAM				La Addition
STREET ADDRESS				ET ADDRESS		•	
CITY-ST-ZIP				-ST-ZIP			

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 t 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: RAYMON L F PRITCHETT D ROYMON