

FILE NOW: FILING FEE IS \$61.25

FILED

**Feb 17 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N94000005164 (8)
1. Corporation Name
FIRST BAPTIST CHURCH OF AVON PARK, FLORIDA INC.



Principal Place of Business 100 N LAKE AVE AVON PARK FL 33825	Mailing Address 100 N LAKE AVE AVON PARK FL 33825
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3. Date Incorporated or Qualified
10/17/1994

4. FEI Number
59-0862867

Applied For	
Not Applicable	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt #, etc.	26 Suite, Apt #, etc.
22 City & State	27 City & State
23 Zip	28 Country
24	25
29	30

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. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

**WORDEN, HAROLD C
100 N LAKE AVE
AVON PARK FL 33825**

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 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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PCD	<input checked="" type="checkbox"/> DELETE
NAME	LANGFORD, DAVID	
STREET ADDRESS	3060 N CAMBRIDGE RD	
CITY-ST-ZIP	AVON PARK FL	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	WORDEN, HAROLD C.	
STREET ADDRESS	24 E. KENDALL BLVD.	
CITY-ST-ZIP	AVON PARK FL	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	NELSON, CURTIS	
STREET ADDRESS	14 W WOLF ST	
CITY-ST-ZIP	AVON PARK FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	WORDEN, HAROLD C	
STREET ADDRESS	24 E KENDALL BLVD	
CITY-ST-ZIP	AVON PARK FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PCD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Severn, Randy	
1.3 STREET ADDRESS	334 S. Marlon Rd.	
1.4 CITY-ST-ZIP	Avon Park, FL 33825	
2.1 TITLE	VCD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Wicker, Gerald	
2.3 STREET ADDRESS	301 N. Verona Ave.	
2.4 CITY-ST-ZIP	Avon Park, FL 33825	
3.1 TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Loveless, Al	
3.3 STREET ADDRESS	804 E. Bell St.	
3.4 CITY-ST-ZIP	Avon Park, FL 33825	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I 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: *Harold C. Worden* **Harold C. Worden** FEB 11, 1998 941-453-6681

CR2E037 (10/97)