

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **N95000003841 (2)**

1. Corporation Name

BIBLE-BASED FELLOWSHIP DEVELOPMENT CORPORATION



Principal Place of Business

Mailing Address

**4811 EHRlich ROAD
TAMPA FL 33624**

**4811 EHRlich ROAD
TAMPA FL 33624**

3. Date Incorporated or Qualified
08/10/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-3331974

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

23 Zip

Country

28 Zip

Country

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

24

25

29

30

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

**MATTHEWS, JR., W. PAUL REV.
4811 EHRlich ROAD
TAMPA FL 33624**

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

Signature typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent Signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE **P** ☐ DELETE
NAME **JONES, ARTHUR R REV.**
STREET ADDRESS **2201 HERNDON STREET**
CITY-ST-ZIP **DOVER FL 33527**

TITLE **VP** ☐ DELETE
NAME **MASON, SR., EARL B REV.**
STREET ADDRESS **13212 BURNES LAKE DRIVE**
CITY-ST-ZIP **TAMPA FL 33612**

TITLE **VP** ☐ DELETE
NAME **MATTHEWS, JR., W. PAUL REV.**
STREET ADDRESS **4811 EHRlich ROAD**
CITY-ST-ZIP **TAMPA FL 33624**

TITLE **S** ☐ DELETE
NAME **JACKSON, SANDRA GRAY**
STREET ADDRESS **4811 EHRlich ROAD**
CITY-ST-ZIP **TAMPA FL 33624**

TITLE **T** ☐ DELETE
NAME **HUNTER, RUTH P**
STREET ADDRESS **4811 EHRlich ROAD**
CITY-ST-ZIP **TAMPA FL 33624**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE **D**

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

Jones, Arthur T. Rev. ☒ Change ☐ Addition

6433 Renwick Circle

Tampa, FL 33647

21 TITLE **D**

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

300001722143 ☐ Change ☐ Addition

-02/23/96--01017--009

*****122.75**

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

☐ Change ☐ Addition

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

Jackson, Sandra Gray ☒ Change ☐ Addition

16103 Pennington Road

Tampa, FL 33624

51 TITLE **D**

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

☒ Change ☐ Addition

1024 Applewood Drive

Clearwater, FL 34619

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

☐ Change ☐ Addition

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 119.07(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: **Arthur T. Jones**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/19/96

83-264-4050

Daytime Phone #

CR2E037 (12/95)

PM 3-25-96