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NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N95000004166 (3)

1. Corporation Name

FIRST BAPTIST CHURCH OF LAKE MARY, INC.



Principal Place of Business

Mailing Address

POST OFFICE BOX 950914
LAKE MARY FL 32795-0914

POST OFFICE BOX 950914
LAKE MARY FL 32795-0914

3. Date Incorporated or Qualified

08/30/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

QUENTIN, DONALD
409 COUNTRY WOOD CIRCLE
LAKE MARY FL 32746-0914

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12

TITLE D ☒ DELETE
NAME MILLS, EARL G
STREET ADDRESS 8704 BAY RIDGE BLVD.
CITY-ST-ZIP ORLANDO FL 32819

1.1 TITLE D ☐ Change ☒ Addition
1.2 NAME Richard Speicher
1.3 STREET ADDRESS 572 Providence
1.4 CITY-ST-ZIP Deltona, FL, 32725

TITLE D ☐ DELETE
NAME KEMPKE, LEONARD
STREET ADDRESS 6094 FEATHER LANE
CITY-ST-ZIP SANFORD FL 32771

2.1 TITLE D ☐ Change ☒ Addition
2.2 NAME B. H. Terwilliger
2.3 STREET ADDRESS 309 W. 15th St.
2.4 CITY-ST-ZIP Sanford, FL, 32771

TITLE D ☐ DELETE
NAME WEEKLEY, JAMES
STREET ADDRESS 319 SO. ELLIOT AVENUE
CITY-ST-ZIP SANFORD FL 32771

3.1 TITLE D ☐ Change ☒ Addition
3.2 NAME Ed Futrell
3.3 STREET ADDRESS 357 Oak Leaf Cir.
3.4 CITY-ST-ZIP Lake Mary, FL, 32746

TITLE D/T ☐ DELETE
NAME NEVILLE, ROBERT
STREET ADDRESS 106 SATSUMA DRIVE
CITY-ST-ZIP SANFORD FL 32771

4.1 TITLE D ☐ Change ☒ Addition
4.2 NAME Jack Bering
4.3 STREET ADDRESS 4270 Irongate Ct.
4.4 CITY-ST-ZIP Sanford, FL, 32773

TITLE D ☒ DELETE
NAME GATLIN, STEVE
STREET ADDRESS 452 AUTUMN OAKS PLACE
CITY-ST-ZIP LAKE MARY FL 32746

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME B. H. Terwilliger
STREET ADDRESS 309 W. 15th St.
CITY-ST-ZIP Sanford, FL, 32771

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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:

Robert Neville, Treasurer 3/30/96 (407) 333-2665
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone Ext. 3017

CR2E037 (12/95)