## 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 # N960

N96000001920 (5)

THE FLORIDA ASSOCIATION OF SOUTHERN BAPTIST SCHOOLS, INC.

## FILED Jun 17 1997 8:00am Secretary of State



Principal Place of Business Mailing Address					li				
, ·					1				
3300 NORTH TENTH AVE. PALM SPRINGS FL \$3461		3300 NORTH TENTH AVE. PALM SPRINGS FL 33461-2908				N.			
					3. Date 0	Incorporated or Qualified 4/04/1996	3a. Date of t	ast Report	
2. Principal F	Place of Business	2a. Mailing Address			4. FEI N			Applied For	
21		26			45	45 - 06 9 35 2 0 Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certif	cate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State			6. Electi	6. Election Campaign Financing \$5.00 May Be			
23	28					Fund Contribution		dded to Fees	
Zip	Country Zip Coi		of the corporation habitity for interrigible tax and or s. 196.05E.						
24	25 29 30  9. Name and Address of Current Registered Agent				Florida Statutes Yes X No  10. Name and Address of New Registered Agent				
	y, Name and Address of Curren	it negistered Agent		81 Nam		and Address of New Re	gistered Agent		
FUANA	04001 4 00			- Ivaii					
	CAROL A DR.	82 Street Add			et Address (P.O. Bo	ddress (P.O. Box Number is Not Acceptable)			
3300 NO	ORTH TENTH AVE.		83						
PALM S	Frings FL 33461			83					
	;			84 City			FL 85	Zip Code	
11. Pursuant office or agent. I s	to the provisions of Sections 617,050 registered agent, or both, in the State am familiar with, and accept the obliga	2 and 617.1508, Florida Statu of Florida. Such change was ations of, Section 617.0503, F	ites, the ab authorized forida Stati	ove-name by the coutes.	ed corporation subrorporation's board of	nits this statement for the p of directors. I hereby accep	urpose of chang of the appointment	ging its registered ent as registered	
SIGNATURE					'				
	Signature, typed or printed name of registered ago			Agent signal	ure required when reinstall		DATE		
12.	OFFICERS ANI		13.			ONS/CHANGES TO OFFIC			
TITLE	D OOOLOOV OLIOAN	DELETE	1.1 70		James H	111	Cr	nange 🔀 Addition	
NAME	GOOLSBY, SUSAN		1.2 NA		Dann S.	W. 168th St.			
STREET ADDRESS	2102 BELL SHOALS ROAD			REET ADORES		L 33157			
CITY-ST-ZIP	BRANDON FL 33511	DELETE	1.4 CITY		Miami r	L 3310 1		I takina	
TITLE	D DANG CAROL A DR	LJ DELETE	2.1 TIT				L., U	nange 🔲 Addition	
NAME	EVANS, CAROL A DR.		2.2 NA						
STREET ADDRESS	3300 NORTH TENTH AVE.			REET ADDRES	s				
CITY-ST-ZIP	PALM SPRINGS FL 33461	☐ DELETE		TY-ST-ZIP	<del>- </del>		☐ Ch	nange Addition	
	HYATT, CAROL	☐ occeie	3.1 TIT				i) (i	lange Addition	
NAME	625 PARK AVE.		3.2 NA		_			1	
STREET ADDRESS	LAKE PARK FL 33403			REET ADDRES	8				
CITY-ST-ZIP TITLE	DAILE FARIN PC 33403	DELETE	3.4. CI	TY-ST-ZIP		<u>w</u>	[ ] Ch	nange Addition	
NAME		C ofecir	4.7 N					lange	
STREET ADDRESS	1			REET ADDRESS	°			Ţ	
TITLE		DELETE	5.1 TIT	Y-ST-ZIP	<del></del>		☐ Ch	lange Addition	
NAME			5.2 NA				U	- Named	
STREET ADDRESS			. I	mil Reet addres:				ļ	
				NEET ADDRES: Y-ST-ZIP	<b>~</b>			Ì	
CITY-ST-ZIP TITLE		DELETE	6.1 TIT				☐ Ch	lange Addition	
NAME		OFFEE	6.2 NA		'				
STREET ADDRESS				reet addres:				1	
				Y-ST-ZIP					
CITY-ST-ZIP			<u> </u>	1-01-417	1	40.0010.00 80.11			

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 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.

CICHATURE. .