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Jun 16 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N96000004276 (9)

1. Corporation Name

PROVIDENCE BAPTIST CHURCH OF CLAY COUNTY, INC.

Principal Place of Business

Mailing Address

2703 RIVER OAK DRIVE
ORANGE PARK FL 32073

2703 RIVER OAK DRIVE
ORANGE PARK FL 32073-6532



3. Date Incorporated or Qualified
08/17/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-3397883

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

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

WILLIAMS, GRADY H JR.
1279 KINGSLEY AVENUE STE 117
ORANGE PARK FL 32073

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 re-stating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME ABISHIRE, KYLE D
STREET ADDRESS 960 PLAINFIELD AVENUE
CITY-ST-ZIP ORANGE PARK FL 32073

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

TITLE D
NAME CHILDS, DAVID
STREET ADDRESS 7410 ORTEGA HILLS DRIVE
CITY-ST-ZIP JACKSONVILLE FL 32244

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

TITLE D
NAME REYNOLDS, MARY
STREET ADDRESS 226 BRANSCOMB ROAD
CITY-ST-ZIP GREEN COVE SPRINGS FL 32043

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

TITLE D
NAME JAMESON, WILLIAM L
STREET ADDRESS 2599 FOXWOOD ROAD SOUTH
CITY-ST-ZIP ORANGE PARK FL 32073

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

TITLE D
NAME POLE, DILLON
STREET ADDRESS 3930 MAIN ST
CITY-ST-ZIP MIDDLEBURG FL 32068

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

TITLE D
NAME RODGERS, JACK
STREET ADDRESS 6459 JACK WRIGHT ISLAND ROAD
CITY-ST-ZIP ORANGEDALE FL 32092

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-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 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.

William L. Jameson,

CR2E037 (9/96)