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FILED  
May 15 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P96000049398 (6)

1. Corporation Name

FLORIDA BAPTIST AUXILIARY ENTERPRISES, INC.

Principal Place of Business

1320 HENDRICKS AVE.  
JACKSONVILLE FL 32207

Mailing Address

1320 HENDRICKS AVE.  
JACKSONVILLE FL 32207

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/04/1991

4. FEI Number

59-3063645

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

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

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

BORDERS, GEORGE R  
1320 HENDRICKS AVE.  
JACKSONVILLE FL 32207

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and block if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME LOPEZ, MIGUEL A SR.  
STREET ADDRESS 1450 MADRUGA AVE., STE. 210  
CITY-ST-ZIP CORAL GABLES FL 33146 ☐ DELETE

TITLE D  
NAME BRANTLEY, SUZANNE  
STREET ADDRESS 1125 SAVANNAH TRACE  
CITY-ST-ZIP TALLAHASSEE FL 32312 ☐ DELETE

TITLE P  
NAME BORDERS, GEORGE R  
STREET ADDRESS 3182 OLD PORT CIRCLE E  
CITY-ST-ZIP JACKSONVILLE FL ☐ DELETE

TITLE D  
NAME HAGOOD, C. SCOTT  
STREET ADDRESS 4020 SE 38 ST.  
CITY-ST-ZIP OCALA FL ☒ DELETE

TITLE D  
NAME JONES, CECIL S  
STREET ADDRESS 1808 PINE ST.  
CITY-ST-ZIP MELBOURNE FL 32951 ☐ DELETE

TITLE D  
NAME CREASMAN, HERSHEL  
STREET ADDRESS 11131 NW 24TH STREET  
CITY-ST-ZIP CORAL SPRINGS FL ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☐ Change ☒ Addition  
1.2 NAME Jack J. Eassa  
1.3 STREET ADDRESS 2640 Kittback Way  
1.4 CITY-ST-ZIP West Palm Beach, FL 33411-5747

2.1 TITLE S ☐ Change ☒ Addition  
2.2 NAME Joseph D. Howell  
2.3 STREET ADDRESS 7654 Hilsdale Harbor Ct.  
2.4 CITY-ST-ZIP Jacksonville, FL 32216

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

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

6.1 TITLE ☐ Change ☐ 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Joseph D. Howell, Secy 4/29/98 (904) 346-0325

CR2E034 (10/97)