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Jan 24 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 762311 (9)

1. Corporation Name  
FIRST BAPTIST CHURCH OF TRENTON, INC.



Principal Place of Business	Mailing Address
HWY. 26 AT N.E. 2ND ST. P. O. BOX 283 TRENTON FL 32693	HWY. 26 AT N.E. 2ND ST. P. O. BOX 283 TRENTON FL 32693-0283

3. Date Incorporated or Qualified 03/08/1982	3a. Date of Last Report 02/26/1996
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2. Principal Place of Business	2a. Mailing Address	4. FEI Number 59-1437448	Applied For <input type="checkbox"/> Not Applicable
21	26	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
22 Suite, Apt #, etc.	27 Suite, Apt #, etc.	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
23 City & State	28 City & State	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
24 Zip	25 Country		
	29 Zip		
	30 Country		

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
BUSH, WILBUR C. 402 S.W. 5TH AVE. TRENTON FL 32693	81 Name
	82 Street Address (P.O. Box Number is Not Acceptable)
	83
	84 City
	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: Wilbur C. Bush *PM* Jan 15, 1997  
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 <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LORD, E.J.	1.2 NAME	
STREET ADDRESS	NE 5TH AVE AT 2ND ST	1.3 STREET ADDRESS	
CITY - ST - ZIP	TRENTON FL	1.4 CITY - ST - ZIP	
TITLE	VD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH, HAMPTON	2.2 NAME	
STREET ADDRESS	CTY RD 232 HART SPRINGS	2.3 STREET ADDRESS	
CITY - ST - ZIP	TRENTON FL	2.4 CITY - ST - ZIP	
TITLE	SD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRADLEY, CLIFTON	3.2 NAME	
STREET ADDRESS	HWY 28 WEST	3.3 STREET ADDRESS	
CITY - ST - ZIP	TRENTON, FL 00000	3.4 CITY - ST - ZIP	
TITLE	TD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCOTT, LOIS	4.2 NAME	
STREET ADDRESS	SO OF HWY 26	4.3 STREET ADDRESS	
CITY - ST - ZIP	TRENTON FL	4.4 CITY - ST - ZIP	
TITLE	PD <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUSH, WILBUR C.	5.2 NAME	
STREET ADDRESS	402 S.W. 5TH AVENUE	5.3 STREET ADDRESS	
CITY - ST - ZIP	TRENTON FL	5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 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.

SIGNATURE: Wilbur C. Bush *PM* Jan. 15, 1997  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #0011875

CF2E037 (9/96)