2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33272

Entity Name: BAPTIST CHRISTIAN SERVICE CENTER, INC.

FILED
Mar 15, 2017
Secretary of State
CC4546456668

Current Principal Place of Business:

123 KRAFT AVE.

PANAMA CITY. FL 32401-0806

Current Mailing Address:

P.O. BOX 35306

PANAMA CITY. FL 32412-5306 US

FEI Number: 59-1404691 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROWN, PATRICIA 123 KRAFT AVE

PANAMA CITY, FL 32401 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

Title

VD

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PD

 Name
 SELF, BILL
 Name
 TAYLOR, TERRY

 Address
 2915 MARION DRIVE
 Address
 611 FREDERICK ST.

 City-State-Zip:
 PANAMA CITY FL 32405
 City-State-Zip:
 PANAMA CITY FL 32405

City-State-Zip: PANAMA CITY FL 32405 City

TitleSD`TitleTREASURERNameMICHAELIS, KARENNameMATHIS, CHARLESAddress227 S. CHARLENE DRAddress504 HOLLIS AVE

City-State-Zip: PANAMA CITY FL 32404 City-State-Zip: PANAMA CITY FL 32401

Title D Title DIRECTOR

NameJOHNSON, JIMNameDRISKELL, BOBBYAddress8532 DEERPOINT DRAddress2228 EDGEWOOD DR.City-State-Zip:YOUNGSTOWN FL 32466City-State-Zip:PANAMA CITY FL 32405

Title DIRECTOR

Name TREVILLIAN, JOHN
Address 942 KATHERINE AVE.
City-State-Zip: PANAMA CITY FL 32404

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: CHARLES MATHIS TREASURER 03/15/2017

Electronic Signature of Signing Officer/Director Detail

Date