#### 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33272

Entity Name: BAPTIST CHRISTIAN SERVICE CENTER, INC.

FILED
Mar 31, 2016
Secretary of State
CC0935084061

### **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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title ASST. TREASURER Title PD

Name WHITMAN, TRAVIS Name SELF, BILL

Address 157 GOODWIN ST Address 2915 MARION DRIVE

City-State-Zip: WEWAHITCHKA FL 32465 City-State-Zip: PANAMA CITY FL 32405

Title VD Title SD

NameTAYLOR, TERRYNameMICHAELIS, KARENAddress611 FREDERICK ST.Address227 S. CHARLENE DRCity-State-Zip:PANAMA CITY FL 32405City-State-Zip:PANAMA CITY FL 32404

Title TREASURER Title D

Name MATHIS, CHARLES Name JOHNSON, JIM

Address 504 HOLLIS AVE Address 8532 DEERPOINT DR

City-State-Zip: PANAMA CITY FL 32401 City-State-Zip: YOUNGSTOWN FL 32466

Title DIRECTOR Title DIRECTOR

NameDRISKELL, BOBBYNameTREVILLIAN, JOHNAddress2228 EDGEWOOD DR.Address942 KATHERINE AVE.City-State-Zip:PANAMA CITY FL 32405City-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 03/31/2016