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NONPROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

FILED	
May 05 1998 8:00am	1
Secretary of State	

	A BAPTIST CHURCH OF 1	TAMPA, FLORIDA, IN	IC.		1444 444 444 444 444		
SLIGH & DIXO 300 SLIGH AVI TAMPA FL 336	E EAST	SLIGH & DIXON ST 300 SLIGH AVE EAS TAMPA FL 33604	. T		3. Date Incorporated or Qualified 05/31/1960 4. FEI Number 59-0651104		Applied For Not Applicable
2. Principal F	Place of Business	2a. Mailing Address	s		5. Certificate of Status Desired		Additional Required
Suite, Apt.	₩, etc.	Suite, Apt. #, etc	C.		6. Election Campaign Financing Trust Fund Contribution	\$5.00	May Be
City & Stat	6	City & State			7. Is this nonprofit corporation a hon		
Zip 24	Country 25	Zip 29	Coul	ntry	8. This corporation owes or has pald Personal Property Tax due June 3	30. 🔲 Yes	ntangible No
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Reg	istered Agent	
				81 Name	Wasa-11 D=00001		
HORNU	NG, ESTELLE O.		ŀ	82 Street Add	HARDEN DEBORAH dress (P.O. Box Number is Not Acceptable	· ·	
	ST JEAN STREET		ļ	Street Ack	16896 BLEN HEIM) P	
	FL 33604		Ì	83	0300	Α	
				64 00			
			J	84 City	LUTZ	FL 85] 刊	3 S 44
11. Pursuant	to the provisions of Sections 617.0	502 and 617.1508, Florida 9	Statutes, the ab	ove-named co	rporation submits this statement for the puration's board of directors. I hereby accept	rpose of changing	its registered
agent. I a	registered agent, or both, in the Sta im familiar with and accept the obl	ite of Florida. Such change ligations of, Section 617.050	was authorized 33. Florida Statu	I by the corpora	ation's board of directors. I hereby accept	the appointment a	s registered
SIGNATURE	Nelwork	Harden				22/98	,
	Signature, typed or printed name of registered a		(NOTE Registered	Agent signature requ	ulred when reinstating)	DATE	
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE		
TITLE	PD	☐ DELET		u 51	O HARDEN, DEBURAH	☐ Change	X Addition
NAME	SANDERS, J. ROGER		1.2 NA	ME]	16826 BLENHEIM DX	•	
STREET ADDRESS	10707 CARROLL LAKE DR.		1.3 STF	REET ADDRESS	LUTZ, FL 33549	•	
CITY-ST-ZIP	TAMPA FL	177 051 55		Y-ST-ZIP	~4/6, 66 33599		
TITLE	SD	DELET	E 2.1 TIT	lf I			
NAME		ブ ーニー				Change	Addition
STREET ADDRESS	HORNUNG, ESTELLE O.	7	2.2 NA	ME		Change	Addition
	125 WEST JEAN STREET	≯	2.2 NAJ 2.3 STF	ME REET ADDRESS		Change	Addition
CITY-ST-ZIP	125 West Jean Street Tampa Fl		2.2 NA 2.3 STF 2. 4 CT	ME REET ADDRESS TY-ST-ZIP			
CITY-ST-ZIP TITLE	125 WEST JEAN STREET TAMPA FL TD	☐ DELETI	2.2 NAJ 2.3 STF 2.4 CFI E 3.1 TITE	ME REET ADDRESS TY-ST-ZIP		Change	
CITY-ST-ZIP TITLE NAME	125 WEST JEAN STREET TAMPA FL TD RENNER, ORVILLE, SR.	DELET	2.2 NAJ 2.3 STF 2.4 CIT E 3.1 TITE 3.2 NAJ	ME REET ADDRESS TY-ST-ZIP LE ME			
CITY-ST-ZIP TITLE NAME STREET ADDRESS	125 WEST JEAN STREET TAMPA FL TD RENNER, ORVILLE, SR. 2908 WOODS END COURT	DELET	2.2 NAJ 2.3 STF 2.4 CT E 3.1 TITE 3.2 NAJ 3.3 STF	ME REET ADDRESS TY-ST-ZIP LE ME ME REET ADDRESS			
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	125 WEST JEAN STREET TAMPA FL TD RENNER, ORVILLE, SR.	DELETI	2.2 NAI 2.3 STF 2.4 CT E 3.1 TITE 3.2 NAI 3.3 STF 3.4 CT	ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP		☐ Change	Addition
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I hereby certify that the information supplied with this filling 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.

GNATURE:

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