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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 703545

(4)

FILED Apr 30 1997 8:00am Secretary of State

HILLSDALE BAPTIST CHURCH, INC. Principal Place of Business Malling Address										
5800 N. CHURCH AVE. 5800 N. CHURCH AVE. TAMPA FL 33614-5618						1				
, and the grade	•					3. Date Incorporated or Qualified 02/01/1962		e of Last F		
2 Principal F	Place of Business	2a. Mailing Address				4. FEI Number			oplied For	
21	1000 01 1000 11000	26				59-0971834			ot Applicable	
Suite, Apt.	.#, etc.	Suite, Apt. #, etc	÷.			5. Certificate of Status Desired	K	\$8.75	Additional	
22		27				 			equired	
City & Stat	te	City & State				6. Election Campaign Financing			May Be	
23 Z _{IP}	Country	Zip	Cor	untry		Trust Fund Contribution 8. This corporation has fiability for			to Fees	
24	25	29	30				Yes X		. 189.032,	
	9. Name and Address of Curre		11			10. Name and Address of New R				
				81 Na	me					
SEARLE-SPRATT, GEORGE				82 St	eet Addre	ess (P.O. Box Number is Not Accepta	ble)			
5312 M/	ACBETH COURT									
TAMPA	FL 33624			83					1	
				84 Ci	ly		IE1	85 Zip	Code	
				1 1			<u>FL</u>		to registered	
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11. Pursuant office or	to the provisions of Sections 617.05 registered agent, or both, in the State	02 and 617.1508, Florida 5 e of Florida, Such change	Statutes, the a	bove-na	med corpo corporation	oration submits this statement for the on's board of directors. I hereby acce	purpose of pt the appo	changing i sintment as	registered	
	to the provisions of Sections 617.05 registered agent, or both, in the State am amiliar with, and accept the object	02 and 617.1508, Florida 5 e of Florida, Such change gations of Section 617.050	Statutes, the a was authorize 3, Florida Sta	above-na ed by the itutes.	med corpo corporation	oration submits this statement for the on's board of directors. I hereby acce			registered	
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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 it changed or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED WAME OF JUSTING OFFICER OR DIRECTOR

04/16/97

Daytime Phone # 0048195