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Secretary of State

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NONPROFIT
 CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 704907

1. Corporation Name
SHERIDAN HILLS BAPTIST CHURCH, INC.

Principal Place of Business Mailing Address
 3751 SHERIDAN STREET 3751 SHERIDAN STREET
 HOLLYWOOD FL 33021 HOLLYWOOD FL 33021



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		12/11/1962	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-1111743	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>	
23		28		\$8.75 Additional Fee Required	
Zip		Zip		6. Election Campaign Financing	
24		29		Trust Fund Contribution <input type="checkbox"/>	
Country		Country		\$5.00 May Be Added to Fees	
25		30			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
BILLINGSLEY, BILLY F 3751 SHERIDAN ST HOLLYWOOD FL 33021				81 Name COLVIN N. PINKERTON			
				82 Street Address (P.O. Box Number is Not Acceptable) 3751 SHERIDAN ST			
				83			
				84 City Hollywood FL 85 Zip Code 33021			

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 *Colvin N. Pinkerton* DATE **3/03/99**

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	<input type="checkbox"/> DELETE	1.1 TITLE	TREASURER	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	GOSSETT, RONALD		1.2 NAME				
STREET ADDRESS	3800 SW 56TH ST		1.3 STREET ADDRESS				
CITY-ST-ZIP	FT LAUDERDALE FL 33312		1.4 CITY-ST-ZIP				
TITLE	P	<input checked="" type="checkbox"/> DELETE	2.1 TITLE	DIRECTOR	<input checked="" type="checkbox"/> Addition		
NAME	BILLINGSLEY, BILL DECEASED		2.2 NAME	LOWE, CHARLES E.			
STREET ADDRESS	3751 SHERIDAN ST.		2.3 STREET ADDRESS	5131 Monroe Street			
CITY-ST-ZIP	HOLLYWOOD FL 8/21/98		2.4 CITY-ST-ZIP	HOLLYWOOD, FL 33021			
TITLE	D	<input type="checkbox"/> DELETE	3.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	LOCHER, OLIVER G		3.2 NAME				
STREET ADDRESS	4201 N OCEAN DR #507		3.3 STREET ADDRESS				
CITY-ST-ZIP	HOLLYWOOD FL 33019		3.4 CITY-ST-ZIP				
TITLE	S	<input type="checkbox"/> DELETE	4.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	JONES, DAN		4.2 NAME				
STREET ADDRESS	2119 N 40TH AVE		4.3 STREET ADDRESS				
CITY-ST-ZIP	HOLLYWOOD FL 33021		4.4 CITY-ST-ZIP				
TITLE	T	<input type="checkbox"/> DELETE	5.1 TITLE	DIRECTOR	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	STALIONS, WILLIAM		5.2 NAME				
STREET ADDRESS	1821 N 52ND AVE		5.3 STREET ADDRESS				
CITY-ST-ZIP	HOLLYWOOD FL 33021		5.4 CITY-ST-ZIP				
TITLE	VP	<input type="checkbox"/> DELETE	6.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	PINKERTON, COLVIN		6.2 NAME				
STREET ADDRESS	1800 SW 67TH AVE.		6.3 STREET ADDRESS				
CITY-ST-ZIP	PLANTATION FL 33317		6.4 CITY-ST-ZIP				

14. I 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, with all other like empowered.

CR2E037 (11/98)