

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Mar 02, 1999 8:00 am
Secretary of State

03-02-1999 90164 041 ****70.00

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DOCUMENT # 705157

1. Corporation Name

FIRST BAPTIST CHURCH AT UNION PARK, FLORIDA, INC

Principal Place of Business
10301 EAST COLONIAL DRIVE
ORLANDO FL 32817-4333
US

Mailing Address
10301 EAST COLONIAL DRIVE
ORLANDO FL 32817-4333
US



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified
02/04/1963

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number
59-2101463

Applied For
Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

23 Zip

Country

28 Zip

Country

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PRATT, COLEMAN
3131 T.C.U BLVD.
ORLANDO FL 32817

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 *X Coleman Pratt*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-11-99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **DP** ☒ DELETE
NAME **WATSON, JIM**
STREET ADDRESS **1045 HARDWICK**
CITY-ST-ZIP **ORLANDO FL 32825**

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME **DP**
1.3 STREET ADDRESS **Griffin, Rudy**
1.4 CITY-ST-ZIP **10577 JEPSON**
Orlando, FL 32825

TITLE **DV** ☒ DELETE
NAME **WATSON, JIM**
STREET ADDRESS **1045 HARDWICK**
CITY-ST-ZIP **ORLANDO FL**

2.1 TITLE ☐ Change ☒ Addition
2.2 NAME **DV**
2.3 STREET ADDRESS **Geyer, Darrell**
2.4 CITY-ST-ZIP **940 O'Berry Hoover Rd.**
Orlando, FL 32825

TITLE **DS** ☒ DELETE
NAME **GRIFFIN, RUDY**
STREET ADDRESS **10577 JEPSON**
CITY-ST-ZIP **ORLANDO FL**

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME **DS**
3.3 STREET ADDRESS **Watson, James**
3.4 CITY-ST-ZIP **10623 Boland Drive**
Orlando, FL

TITLE **DS** ☒ DELETE
NAME **WATSON, JAMES D.**
STREET ADDRESS **10623 BOLAND DRIVE**
CITY-ST-ZIP **ORLANDO FL**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE **DT** ☐ DELETE
NAME **RICKERT, PAUL**
STREET ADDRESS **14262 ROYAL TARA DRIVE**
CITY-ST-ZIP **ORLANDO FL**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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.

SIGNATURE: *X Signature Required*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-11-99

Date

407-277-9404

Daytime Phone #

CR2E037 (11/98)