FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

OCUMENT # 706526

(1)

SHILOH BAPTIST CHURCH INC

r.	ILED	1
May 30	1997	8:00am
Secreta	ary of	State

Bidl Biok Jibil Biok Dibil Bibil Bibil 1881

Principal Place	O DUSITIOSS	Manning	Mudicas							
343 D STREET LAKE WALES FL	. 33853	343 D S Lake W	TREET ALES FL 33853-31	133						
US		US	us			3. Date Incorporated or Qualified 12/06/1963		3a. Date of Last Report 02/01/1996		
2. Principal Pia	ace of Business	2a. Mail	ing Address			4. FEI Number			Applied For	
21		26				05-0042322			Not Applicable	
Suite, Apt. #	⊭, etc.	Suite 27	e, Apt. #, etc.			5. Certificate of Status Desired			5 Additional Required	
City & State	}		& State			6. Election Campaign Financing		\$5.0	May Be	
23		28				Trust Fund Contribution			ed to Fees	
Zip	Country	Zip		Countr	у	8. This corporation has liability for			r s. 199.032,	
24	25	29		30			Yes 💃			
	9. Name and Address of Curre	nt Registered	l Agent		· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Re	glatered A	gent		
				81	Name					
	D, IDELLA			8:	Street Add	dress (P.O. Box Number is Not Acceptate	le)			
	kson avenue Ales FL 33853			8:			· · · · · · · · · · · · · · · · · · ·			
				84	City		FL	85 Z	ip Code	
44 0	the previous of Sections 617.05	02 and 617 16	00 Elorido Ctati	dan the shor	o named co	rporation submits this statement for the p		changin	a its registered	
office or re	egistered agent, or both, in the Stat	te of Florida. Si	uch change was	authorized t	w the corpori	ation's board of directors. I hereby accep	of the appo	intment	as registered	
agent. I ar	n familiar with, and accept the obli	gations of, Sec	tion 617.0503, F	lorida Statuti	98.					
SIGNATURE _	Signature, typed or printed name of registered a	gent and title if engli	inable (NC	TF: Registered A	ent signature reg	julred when reinstating)	DATE			
12.		ND DIRECTOR		13.		ADDITIONS/CHANGES TO OFFICE	ERS AND	DIRECT	ORS IN 12	
TITLE	PD		DELETE	1.1 TITLE				Chang	je 🔲 Addition	
NAME	MEEKS, FRED			1.2 NAME						
STREET ADDRESS	2425 EVIE STREET			1.3 STRE	T ADDRESS					
CITY-ST-ZIP	LAKE WALES FL		_	1.4 CITY	ST-ZIP					
TITLE	VD		DELETE	2.1 1ITLE		VP.		Chan	e Addition	
NAME	CHRISTIAN, WILLIE			2.2 NAME		Rruce H	ARI	ロイ		
STREET ADDRESS	2324 MAMMOTH GROVE RI	0		2.3 STRE	T ADDRESS	HIS TEAM !!	200	, Ζ		
CITY-ST-ZIP	LAKE WALES FL	-		2.4 CITY	-ST-ZIP	L. Lis to Till aven	77	33	Q81	
TITLE	S		DELETE	3.1 TITLE		to-come interest	7 4	Chan	e Addition	
NAME	HEYWARD, IDELLA			3.2 NAMI	:					
STREET ADDRESS	637 JACKSON AVENUE			3.3 STRE	ET ADORESS					
CITY-ST-ZIP	LAKE WALES FL			3.4. CITY	-ST-ZIP					
TITLE	TD	·····	☐ DELETE	4.1 TITLE			· · · · · · · · · · · · · · · · · · ·	Chan	ge 🔲 Addition	
NAME	KELLY, SEEBER			4. 2 NAM	E					
STREET ADDRESS	323 E. STREET			4.3 STRE	ET ADDRESS					
CITY-ST-ZIP	LAKE WALES FL			4.4 CITY	ST-ZIP					
TITLE	P 1 12 111 124 1 2		DELETE	5.1 YITLE				☐ Chan	ge Addition	
NAME				5.2 NAMI						
STREET ADDRESS					ET ADDRESS					
CITY-ST-ZIP	1			5.4 CITY	1					
TITLE			DELETE	6.1 YITLE			•	Chan	ge Addition	
NAME	7			6.2 NAM						
STREET ADDRESS					ET ADDRESS	• •				
CITY - ST - ZIP	1			6.4 CITY	101-4IF					

11. SI-2IF
14. 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 if changed, or on an attachment with an address.

SIGNATURE

NATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR