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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT #

1. Corporation Name

708058

(3)

FIRST BAPTIST CHURCH OF BRADENTON, FLORIDA, INCORPORATED

| RPOR | ATED | | | | | | | | | | |
|---|---|---|---|---------------|--------------------------|--|---------------------------------|---|--|---------------------------------------|-----------------------|
| Principal Place of Business | | | Mailing Address | | | | | | | | |
| 1306 MANATEE AVENUE WEST BRADENTON FL 34205 | | | 1306 MANATEE AVENUE WEST Bradenton Fl 34205-7520 | | | | | | | | |
| | | | | | | | | 3. Date Incorporated or Qualifie 11/02/1964 | d 3a. | Date of Last F 04/24/18 | leport 396 |
| 2. Principal Place of Business | | | 2a. Mailing Address | | | | | 4. FEI Number 59-1165674 | 1 | A | oplied For |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | | | 08-1100014 | | · · · · · · · · · · · · · · · · · · · | ot Applicable |
| 22 | | | 27 | | | | | 5. Certificate of Status Desired | | • - | Additional equired |
| City & State | | | City & State | | | | 6. Election Campaign Financing | | \$5.00 | May Be | |
| Zip Country | | | Zip Country | | | | Trust Fund Contribution | | | to Fees | |
| 24 | 25 | | Zip Country 30 | | | | | This corporation has liability the Florida Statutes | for intangib | le tax under s | . 199.032, |
| 9. Name and Address of Current Registered Agent | | | | | | 10. Name and Address of New Registered Agent | | | | | |
| | | | | | 81 | Name | 1 | | | | |
| DIEM, J | | | 8 | | | Address | s (P.O. Box Number is Not Accep | table) | ······································ | | |
| 2003 74TH ST. NW | | | | | 80 | | | · | <u> </u> | | |
| BRAUE | NTON FL 34205 | | | | 83 | | | | | | |
| | | | | | 84 | City | | | F | 85 Zip | Code |
| 11. Pursuant | to the provisions of S | ections 617.0502 a | and 617.1508, Flor | ida Statutes, | the above | -named | d corpora | ation submits this statement for th | e numee | of changing if | ts registered |
| office of r | egistered agent, or b m familiar with, and a | oth, in the State of | Florida Such cha | noe was auth | iorized by | the corr | poration' | 's board of directors. I hereby ac | cept the ap | ppointment as | registered |
| SIGNATURE | | | | | | | | | | | |
| 12. | Signature, typed or printed n | ame of registered agent a OFFICERS AND I | | (NOTE: Re | | ni signature | e required w | hen reinstating) | DATE | ID DIDEOTOR | |
| TITLE | TD | OFFICERS AND L | | ELETE | 13. 1.1 TITLE | | T VD | ADDITIONS/CHANGES TO OF | FICERS AF | X Change | Addition |
| NAME | DIEM, JOHN | | | | 1.2 NAME | | 1 | FLOYD PRICE | | CATA Change | Addition |
| STREET ADDRESS | WATEL OF 1541 | | 1.3 \$ | | | | | 20 RIVERVIEW BL | VD W | | |
| CITY-ST-ZIP | BRADENTON, F | L 00000 | | | 1.4 CiTY - S | T-ZIP | BRA | ADENTON FL 3420 | 9 | | |
| TITLE | CD | | X | ELETE | 2.1 TITLE | | CD | | | Change | Addition |
| NAMÉ | HENSLEY, ROE | | | | 2.2 NAME | | VER | RNON H DESEAR J | R | | |
| STREET ADDRESS | 7617 SENRAB | | | | 2.3 STREET | | | 40 26th AVE CT | | | |
| CITY-ST-ZIP TITLE | BRADENTON F SD | L | | | | IT-ZIP | | ADENTON FL 3420 | 9 | Change | Addition |
| NAME | MULLIS, DION | | الحط | /LLL L | 3.1 TITLE 3.2 NAME | | SD | | | Change | Addition Addition |
| STREET ADORESS | 4812 W 26 AVE | <u>:</u> | | | 3.3 STREET | Annress | BIL | | | | |
| CITY-ST-ZIP | BRADENTON F | | | | 3.4. CITY-S | | | L6 22nd AVE W | ^ | | |
| TITLE | VD | | k] (| ELETE | 4.1 TITLE | | -₽K / | ADENTON FL 3420 | 7 | ☐ Change | Addition |
| NAME | STANLEY, CRA | | | | 4. 2 NAME | | | | | | |
| STREET ADORESS | | | 4.3 \$ | | 4.3 STREET ADDRESS | | | | | | |
| CITY-ST-ZIP | BRADENTON F | <u>L</u> | | | 4.4 CITY-S | T-ZIP | | | | | |
| TITLE | <i>2</i> | | L [| ELETE | 5.1 TITLE | | | | | ☐ Change | ☐ Addition |
| NAME STREET ANNUESS | | | | | 52 NAME | *DDDC00 | | | | | |
| STREET ADDRESS City - St - Zip | | | | | 5.3 STREET | | - | | | | |
| TITLE | · · · · · · · · · · · · · · · · · · · | | | ELETE | 5.4 CITY-ST 6.1 TITLE | 1 - 211 | | | | Change | Addition |
| NAME | | | | | 6.2 NAME | | | | | - John Se | + Hodinoli |
| STREET ADDRESS | | | | | 6.3 STREET | ADDRESS . | | | | | |
| CITY-ST-ZIP | | | | | 6.4 CITY-S | 1 | | | | | |

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 of supplemental annual report for 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 chapted, or on an attachment with an address.

SIGNATURE:

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FILED

Mar 05 1997 8:00am

Secretary of State