FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT #

711681

(7)

1. Corporation	n Name	()		
j first i	FREE WILL BAPTIST CHU	irch of Melbourne, i	INC	
•)
Principal Plac	e of Business	Mailing Address		1 . com . code male man lane man lane man dien dien delle delle man entit itali
938 LYTTON R	DAD	938 LYTTON ROAD		3. Date Incorporated or Qualified
MELBOURNE FI	L 32934-9016	MELBOURNE FL 32934-9016	8	10/25/1966
-				4. FEI Number Applied For
				59-2358654 Not Applicable
2. Principal P	lace of Business	2s. Mailing Address		CO 75 Additional
21		26		5. Certificate of Status Desired Fee Required
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.	<u> </u>	8. Election Campaign Financing \$5.00 May Be
22		27		Trust Fund Contribution Added to Fees
City & State	8	City & State		7. Is this nonprofit corporation a homeowners association?
23		28		☐ Yes ☐ No
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25		30	Personal Property Tax due June 30. L Yes L No
	9. Name and Address of Curr	ent Registered Agent	94 1	10. Name and Address of New Registered Agent
81 Name / Name				Charlie J. Charles
	SWARTZ, BILL			Address (P.O. Box Number is Not Acceptable)
	1954 TRIMBLE ROAD			281 Sadžer Lane
MELBOU	IRNE FL 32934		83	
İ			84 City 7	Classical Est 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 partillar with, and accept the prigations of, Section 617.0503, Florida Statutes.				
agent. I am familiar with, and accept the chigations of, Section 617.0503, Florida Statutes. CHARLES 4-26-98				
SIGNATURE	dignatura appear or printed name of highward		Registered Agent signature	required when reinstating) DATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	1	DELETE	1.1 TITLE	Change Addition
NAME	BAILEY, DAVID		1.2 NAME	DAVID BAILEY
STREET ADORESS	2681 SADDLER LANE		1.3 STREET ADDRESS	1073 BELL STREET
CITY-ST-ZIP	MELBOURNE, FL 00000		1.4 CITY-ST-ZIP	MELBOURUE, FL 32935
TITLE	Ť	DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	LEGG, DON		2.2 NAME	
STREET ADDRESS	4394 TWIN LAKES DR		2.3 STREET ADDRESS	
CITY-ST-21P	MELBOURNE, FL 00000		2.4 CITY-ST-ZIP	
TITLE	PD	DELETE	3.1 TITLE	T Change 🔀 Addition
NAME	Burger, ronald K	•	3.2 NAME	BILL SWARTZ
STREET ADDRESS	2740 LORNA DRIVE		3.3 STREET ADDRESS	1954 TRIMBE ROAD
CITY-ST-ZIP	MELBOURNE, FL 00000		3.4. CITY - ST - ZIP	MELBOURNE, FL 32934
TITLE		DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADORESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADORESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

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 eath; 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:

CHAPLIE CHAL

4-26-98

FILED

May 06 1998 8:00am

Secretary of State