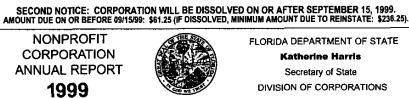
NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 717119

1. Corporation Name

WEST PENSACOLA BAPTIST CHURCH, INC.

Principal Place of Busines:
5213 W. JACKSON ST.
PENSACOLA FL 32506

2. Principal Place of Business

US

Mailing Address

2a. Mailing Address

5213 W. JACKSON ST. PENSACOLA FL 32506-5330

Jun 01, 1999 8:00 am Secretary of State

06-01-1999 90006 036 ****61.25

6 607259 - 90004 - 42

3. Date Incorporated or Qualifed

21		26			09/09/1969			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			4. FEI Number		Apr	lied For
22		27			59-1495203			Applicable
City & State	е	City & State			5. Certificate of Status De	sired 🗀	\$8.75 A	
23		28			J. Certificate of Oldios Do.		Fee Rec	quired
Zip	Country	Zip	Country	/	6. Election Campaign Fina	ancing	\$5.00 1	
24		29 30	0		Trust Fund Contribution	1	Added to	Fees
	9. Name and Address of Current	Registered Agent		T	10. Name and Address of	New Registered	Agent	
			81	Name C	Larks Solv	anain		
ANDREW	S, PATRICK R		82	Street Addr	harles Salv ess (P.O. Box Number is Not	Acceptable)		
	METER ST			104	Elm Street	<u> </u>		
	LA-FL 32506		83					
			84	City			85 Zip C	ode
			54	Pens	saæla	FL	32	ode 506
11. Pursuant	to the provisions of Sections 617.0502	and 617.1508, Florida Statutes,	, the abov	e-named com	oration submits this statement	for the purpose of	changing its r	registered
office or re	egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida Such change was auth	ionzed by	the corporation	on's board of directors. I hereb	y accept the appoir	ntment as reg	ıstered
				••		A-73	- 14-90	7
SIGNATURE	Stignature, typed or printed name of registered agent a	and title if applicable. (NOTE: Re	egistered Age	nt signature required	d when reinstating)	DATE	-14-99	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES	TO OFFICERS AN	D DIRECTO	RS IN 12
TITLE	SD	☐ DELETE	1.1 TITLE				☐ Change	Addition
NAME	KING, VIRGINIA		1.2 NAME					
STREET ADDRESS	7446 KLONDIKE RD		1.3 STREE	TADDRESS				
CITY-ST-ZIP	PENSACOLA FL		1.4 CITY-S					
TITLE	D	☐ DELETE	2.1 TITLE	71-27	.		☐ Change	Addition
NAME	TAYLOR, EDDIE	_	2.2 NAME	1				
STREET ADDRESS	7048 GLENDORA ST			T ADDRESS				
~	PENSACOLA FL		2.4 CITY-					
CITY-ST-ZIP TITLE	DT	☐ DELETE	3.1 TITLE	31-21	 		☐ Change	Addition
	_ - '	—	3.2 NAME					
NAME	LEWIS, GARY			TADDRESS				
STREET ADDRESS	223 TOPAZ ST			i				
CITY-ST-ZIP	PENSACOLA FL	☐ DELETE	3.4. CITY-:	ST-ZIP	 		Change	Addition
TITLE	DC	□ percie						
NAME	MARKHAM, RANDY		4. 2 NAME					
STREET ADDRESS	7225 W FAIRFIELD DR APT E6			T ADDRESS				
CITY-ST-ZIP	PENSACOLA FL		4.4 CITY-S	ST-ZIP			☐ Change	☐ Addition
TITLE		☐ DELETE	5.1 TITLE				☐ Cuanôe	☐ Addition
NAME			5.2 NAME					
STREET ADDRESS				TADDRESS	*			
CITY+ST-ZIP			5.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	6.1 TITLE				☐ Change	☐ Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE	T ADDRESS				
CITY, ST. 7ID			6.4 CITY- 5	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:

850-455-6077 Davtime Phone #