FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Jun 03 1998 8:00am Secretary of State

1998
DOCUMENT #

728659

The First Baptist Church ofBunche Park Board of Incorporators

Principal Place of Business Mailing Address

Amended

ł .							l		
15700 N.W. 22nd Ave. 1			16141	16141 Bunche P		. Es Dr	3. Date Incorporated or Qualified		
	Opa Locka.	F1. 33054	Opa Lo	ocka, Fl	. :	33054	Jan. 22, 1974		
							4. FEI Number Applied For		
							23-7366401 Not Applicable		
2.	Principal Place of Bus-	noss	2a. Mailing Ad	Idress			6. Certificate of Status Desired \$8.75 Additional		
21			26				Fee Required		
\Box	Suite, Apt. #, etc.		Suite, Apt. #, etc.				Election Campaign Financing \$5.00 May Be		
22			27				Trust Fund Contribution		
				City & State			7. Is this nonprofit corporation a homeowners association?		
23			28				☐ Yes ☐ No		
_	Zip	Country	Zip	Co	untry	'	8. This corporation owes or has paid the current year intangible		
24		25	29	30			Personal Property Tax due June 30. 🔲 Yes 🔲 No		
9. Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent		
					81	Name			
John A. Williams 16141 Bunche Park Drive E. Opa Locka, Fl. 33054						Street Addres	eet Address (P.O. Box Number is Not Acceptable)		
					84		FL 85 Zip Code		
11	. Pursuant to the provis	sions of Sections 617.0502 a	ind 617.1508, Flo	orida Statutes, the a	boye	-named corpor	ration submits this statement for the purpose of changing its registered		

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 femiliar with, and accept the obligations of, Section 617.0503, Florida Statutes.

agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.									
SIGNATURE Signature Typed or product randor of registered agent and fixed applied the (NOTE Registered Agent signature required when reinstating) DATE									
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12						
THILE	Chairman DELETE	11 DITLE	Director Change Maddition						
NAME	Paul Wellons	1.2 NAME	Johnny? Smith						
STREET ADDRESS	18555 N.W. 38th Ave.	1.3 STREET ADDRESS	19620 N.W. 5th Ave.						
CITY - ST - ZIP	Miame Pl. 33055	1.4 CITY - ST - ZIP	Miomi 71 23160						
TITLE		2.1 TITLE	Change Addition						
NAME	yICE-Chairman John A. Williams	2.2 NAME							
STREET ADDRESS	16141 Bunche Pk. Dr. E.	2 3 STREET ADDRESS							
CITY-ST-ZIP	Opa Locka, F1. 33054	2 4 CITY - S1 - ZIP							
TITLE	Secretary	3 1 TITLE	☐ Change ☐ Addition						
NAME	Eugene C. Thomas	3 2 NAME							
STREET ADDRESS	18865 N.W. 14th Rd.	3 3 STREET ADDRESS	,						
CITY-ST-2IP		3.4. CITY-ST-ZIP							
TITLE	Director DELETE	4 1 TITLE	☐ Change ☐ Addition						
NAME		4 2 NAME							
STREET ADDRESS	Archie McKay 16120 Bunche Pk. Dr. E.	4.3 STREET ADDRESS							
CITY-ST-ZIP	One Locks #1 33054	4 4 CITY - ST - 7IP							
TITLE	Treasurer	5.1 TITLE	☐ Change ☐ Addition						
NAME	Gloria Nelson	5.2 NAME							
STREET ADDRESS	1755 N.W. 154th St.	5.3 STHEET ADDRESS							
CITY-ST-ZIP	Opa Locka F1. 33054 DELETE	5.4 CITY-ST-ZIP							
TITLE	Assistant Sec'y.	6 1 TITLE	1000025479F Panne Chaddition -06/04/9801070042						
NAME	Loretta Fletcher	6.2 NAME	-ne/n4/99ninznn45						
STREET ADDRESS	3521 N.W. 171st	6 3 STREET ADDRESS	***61.25						
CITY-ST-ZIP	Minmi P1 22054	6.4 CITY - ST - ZIP	****D1,20						

14. I hereby certify that the information supplies with this thing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this armus' report or supplemental armus' 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 changes or on an attachment with an address.

SIGNATURE:

ugene Chimas Eu

My Eugene C. Thomas

5-20-98 (205) 594-1642

(2E037 (10/97)