## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # 740631**

1. Corporation Name

WESTSIDE CHURCH OF CHRIST OF DAYTONA BEACH, FLOR IDA, INC.

Principal Place of Business 960 BETHUNE BLVD. P. O. BOX 9178 DAYTONA BEACH FL 32120 Mailing Address

P. O. BOX 9178 DAYTONA BEACH FL 32120

## **FILED** Mar 14, 1999 8:00 am § Secretary of State

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US									
Principal Place of Business 2a. Mailing Address 26			dress			3. Date Incorporated or Qualifed 10/26/1977			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				4. FEI Number Applied I			
22	27			59-1786051	No	t Applicable			
City & Stat	de	City & Sta	ate			5. Certifcate of Status Desired - Securificate of Status Desired Fee Required			
: Zip	Country	Zip	Country			6. Election Campaign Financing S5.00 May Be			
24	25	Trust Fund Contribution	Added t	o Fees					
	9. Name and Address of Current	Registered Age	nt			10. Name and Address of New Registered A	.gent		
				81	Name				
JOHN HE	NRY BELL, SR.			82	Street Ac	Idress (P.O. Box Number is Not Acceptable)			
	THA DRIVE					,	_		
. —	BEACH FL 32114			83	T.				
DATION	Topposer source of the Arthur 1 T T			84	City		85 Zip (	Code .	
					"	<u>FL</u>			
office or agent. I a	to the provisions of Sections 617.0502 registered agent, or both, in the State or am familiar with, and accept the obligation	r Florida. Such cr	lange was autr	nonzea by	the corpora	orporation submits this statement for the purpose of cation's board of directors. I hereby accept the appoin	tment as re	gistered	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable.	(NOTE: Re	egistered Age	nt signature requ	uired when reinstating) DATE			
12.	OFFICERS AND	DIRECTORS	***	13.		ADDITIONS/CHANGES TO OFFICERS AND			
TITLE	PD	Ε	DELETE	1.1 TITLE			Change	Addition	
NAME	BELL, JOHN HENRY, SR			1.2 NAME					
STREET ADDRESS	44 E4E44 BBNE			1.3 STREE	TADDRESS				
CITY-ST-ZIP					ST-ZIP				
TITLE	VD		DELETE	2.1 TITLE			Change	☐ Addition	
NAME	COLEMAN, JOSEPH L			2.2 NAME					
STREET ADDRESS				2.3 STREE	TADDRESS				
CITY-ST-ZIP	DAYTONA BCH, FL 00000			2. 4 CITY-	ST-ZIP				
TITLE	TD		] DELETE	3.1 TITLE			Change	☐ Addition	
NAME	CONAWAY, VERNON			3.2 NAME	1	* * · · · · · · · · · · · · · · · · · ·			
STREET ADDRESS	1653 SLOGAR CIRCLE			3.3 STREE	T ADDRESS				
CITY-ST-ZIP	DAYTONA BCH, FL 00000	~ ··		3.4. CITY-	ST-ZIP			CT A LEG	
TITLE	D		DELETE	4.1 TITLE			Change	Addition	
NAME	BELL, LOUIS A JR.			4. 2 NAME	: [				
STREET ADDRESS	765 COLFAX DRIVE			4.3 STREE	T ADDRESS				
CITY-ST-ZIP	DAYTONA BCH, FL 00000		=	4.4 CITY-	ST-ZIP				
TITLE	D		DELETE	5.1 TITLE			☐ Change	Addition	
NAME	BELL, DAVID			5.2 NAME					
STREET ADDRESS	4026 CALUSA LANE			E .	TADDRESS				
CITY-ST-ZIP	ORMOND BEACH FL			5.4 CITY-5	ST-ZIP				
TITLE	SD		DELETE	6.1 TITLE			Change	Addition	
NAME	DURIAS, RICKY			6.2 NAME					
STREET ADDRESS				6.3 STREE	TADDRESS				
OTTY ET 7th	DAYTONA REACH EL			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:**