FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #
1. Corporation Name

753101

(5)

WESTVIEW RAPTIST CHURCH OF SANFORD, INC.

WESTV	TEW BAFTIST CHUNCH OF	SANFOND, ING.	,		
Principal Place	e of Business	Mailing Address			
4100 PAOLA RO SANFORD FL 3 US		4100 PAOLA ROAD SANFORD FL 32771-7701 US			
				3. Date Incorporated or Qualified 06/24/1980	3a. Date of Last Report 02/22/1996
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	# etc	Suite, Apt. #, etc.		59-2015744	Not Applicable
22	#, CIO.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	
24	25	29	30		Yes No
	9. Name and Address of Currer	nt Hegistered Agent	81 Name	10. Name and Address of New Re	gistered Agent
-LEGGE.	PALIL			Kidd, Ron	-1-(\
100 QUAIL RIDGE COURT-			52 Street A	Address (P.O. Box Number is Not Acceptal 5127 Richland Road	d
SANFORD FL 32771			83		
			84 City	Sanford	85 Zip Code
11. Pursuant	to the provisions of Sections 617.050	02 and 617.1508, Florida Statu	tes, the above-named	ananantian a danita this statement for the	purpose of changing its registered
office or ri agent. I a	egistered agent, or both, in the State m familiar with, and accept the ablig	e of Florida. Such change was altion 1, Section 617.0503, F	authorized by the corp lorida Statutes.	oration's board of directors. I hereby acce	pt the appointment as registered
SIGNATURE	INON BY	OU .		Ron Kidd	1/10/97
12,	Signature typed or printed name of registered ag-	ent and title if applicable. (NO ID DIRECTORS	TE: Registered Agent signature	required when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE CEDE AND DIRECTORS IN 12
TITLE	\$	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFIC	Change Addition
NAME	GRIFFITH, EMILY		1.2 NAME		
STREET ADDRESS	2780 NARCISSUS AVE.		1.3 STREET ADDRESS		
CITY - ST - ZIP	SANFORD FL		1.4 CITY-ST-ZIP		M
TITLE	PD Legge, Paul	☐ DELETE	21 TITLE	PD Valaa n	Change Addition
NAME STREET ADDRESS	100 QUAIL RIDGE COURT	···	2.2 NAME 2.3 STREET ADDRESS	Kidd, Ron 5127 Richland Rd.	
CITY-ST-ZIP	SANFORD FL		2 4 City-St-ZiP	Sanford. Fl 32773	
TITLE	V 0	☐ DELETE	31 TITLE	VD.	Change Addition
NAME	STEINMEYER, LEON		3.2 NAME	Batchelor, Margare	et
STREET ADDRESS	-106 SHADY OAK DRIVE SANFORD FL		3.3 STREET ADDRESS	32014 Holopaw Tra	
CITY-ST-ZIP TITLE	VD SAMFORD FL	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	Sorrento, FL 32776	Change Addition
NAME	ROGERS, FENTON	vicit	4.2 NAME		CT Average CT (virting)
STREET ADDRESS	119 KAYWOOD DRIVE		4.3 STREET ADDRESS		
CITY - ST - ZIP	SANFORD FL		4.4 CITY-ST-ZIP		
TITLE	T	DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	CLARY, HAROLD W		5.2 NAME		
STREET ADDRESS	403 VALENCIA COURT		5.3 STREET ADORESS		
CITY-ST-ZIP TITLE	LONGWOOD FL	☐ DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME			6.2 NAME		and a miles
STHEET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
				ated in Section 119.07(3)(i), Florida Statute that my signature shall have the same legal	
l am an o		r the receiver or trustee empor	wered to execute this re	eport as required by Chapter 617, Florida S	
	ν	17 \ 11/1	D = = - 1/2 1 + -		

SIGNATURE:

(407)322-1088

FILED

Jan 22 1997 8:00am

Secretary of State