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Apr 15, 1999 8:00 am
Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 762582					
1. Corporation Name FIRST BAPTIST CHURCH OF WELLINGTON, INC.					
Principal Place of Business 12700 FOREST HILL BLVD. W WELLINGTON FL 33414-4765 US			Mailing Address 12700 FOREST HILL BLVD. W WELLINGTON FL 33414-4765 US		



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/24/1982	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-2025397	
22	City & State	27	City & State	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
24	Country	29	Country	30	

9. Name and Address of Current Registered Agent TOWNSEND, TERRY G. 12700 FOREST HILL BLVD. WEST WELLINGTON FL 33414				10. Name and Address of New Registered Agent	
81 Name				82 Street Address (P.O. Box Number is Not Acceptable)	
83				84 City	
				85 Zip Code FL	

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

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	TOWNSEND, TERRY G.	1.2 NAME	
STREET ADDRESS	12700 FOREST HILL BLVD W	1.3 STREET ADDRESS	
CITY-ST-ZIP	WELLINGTON FL	1.4 CITY-ST-ZIP	
TITLE	TR ☒ DELETE	2.1 TITLE	☒ Change ☐ Addition
NAME	MORRIS, ROBERT R.	2.2 NAME	
STREET ADDRESS	267 OLD COUNTRY ROAD	2.3 STREET ADDRESS	14829 Horseshoe Trace
CITY-ST-ZIP	WELLINGTON FL	2.4 CITY-ST-ZIP	Wellington, FL 33414
TITLE	TR ☒ DELETE	3.1 TITLE	☒ Change ☐ Addition
NAME	DANCE, JOE	3.2 NAME	OWSLEY, JOE
STREET ADDRESS	330 OLD COUNTRY RD	3.3 STREET ADDRESS	2919 Palm Deer Drive
CITY-ST-ZIP	WELLINGTON FL	3.4 CITY-ST-ZIP	Loxahatchee, FL 33470
TITLE	T ☒ DELETE	4.1 TITLE	☒ Change ☐ Addition
NAME	HUTCHESON, CLAYTON	4.2 NAME	CAUSEY, WILLIAM
STREET ADDRESS	1125 46TH PL NO	4.3 STREET ADDRESS	892 Lantern Tree Lane
CITY-ST-ZIP	ROYAL PALM BEACH FL	4.4 CITY-ST-ZIP	Wellington, FL 33414
TITLE	T ☒ DELETE	5.1 TITLE	☒ Change ☐ Addition
NAME	DANCE, JOE	5.2 NAME	STRICKLAND, Alan
STREET ADDRESS	330 OLD COUNTRY RD	5.3 STREET ADDRESS	8274 Coconut Boulevard
CITY-ST-ZIP	WELLINGTON FL	5.4 CITY-ST-ZIP	Royal Palm Beach, FL 33412
TITLE	S ☒ DELETE	6.1 TITLE	☒ Change ☐ Addition
NAME	JOYNER, JULIE	6.2 NAME	AUTWELL, ELISE
STREET ADDRESS	13253 KEY LIME BLVD	6.3 STREET ADDRESS	16121 73 Ct. No.
CITY-ST-ZIP	W PALM BEACH FL	6.4 CITY-ST-ZIP	Loxahatchee, FL 33470

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: *Ken Townsend* **SIGNATURE REQUIRED** *Terry G. Townsend* 4/08/99 (561) 793-5670

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

— CR2E037 (1/98)