


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

**FILED**

**Mar 26 1998 8:00am  
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Morthem</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 770479 (4)**

1. Corporation Name  
**MYRTLE LAKE BAPTIST HOLDING CO.**

Principal Place of Business <b>2017 RIEGLER ROAD LAND O LAKES FL 34639</b>	Mailing Address <b>2017 RIEGLER ROAD LAND O LAKES FL 34639</b>
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3. Date Incorporated or Qualified <b>09/29/1983</b>	
4. FEI Number <b>59-2244542</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business <b>21</b>	2a. Mailing Address <b>28</b>
Suite, Apt. #, etc. <b>22</b>	Suite, Apt. #, etc. <b>27</b>
City & State <b>23</b>	City & State <b>28</b>
Zip <b>24</b>	Country <b>25</b>
Zip <b>29</b>	Country <b>30</b>

9. Name and Address of Current Registered Agent

**HESS, LARRY  
2943 LAKE SAXON DR  
LAND O'LAKES FL 34639**

10. Name and Address of New Registered Agent

81 Name <b>LEON WHITE JR</b>	
82 Street Address (P.O. Box Number is Not Acceptable) <b>3150 CASTLE ROCK CIRCLE</b>	
83	
84 City <b>LAND O'LAKES</b>	85 Zip Code <b>FL 34639</b>

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 LEON WHITE JR *Leon White Jr* **1/20/98**

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 <b>CD</b>	<b>HESS, LARRY</b> 2943 LAKE SAXON DR LAND O'LAKES FL	1.1 TITLE <input checked="" type="checkbox"/> DELETE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE <b>D</b>	<b>WILLIAMS, DELMAR</b> PO BOX 858 N/A LAND O'LAKES FL	2.1 TITLE <input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE <b>SD</b>	<b>STAPP, PATRICIA D.</b> 7805 TALLOWTREE DRIVE/P.O. BOX 7209 WESLEY CHAPEL FL	3.1 TITLE <i>Director</i> <del><b>GEORGE HARRISON</b></del>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE <b>D</b>	<b>GAINES, LEE</b> 4580 PARKWAY BLVD LAND O'LAKES FL	4.1 TITLE <i>Director</i> <b>BLAINE GLADSON</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE <b>D</b>	<b>HARRISON, GEORGE</b> 23817 LAKE HILLS DR LUTZ FL	5.1 TITLE <input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE <input type="checkbox"/> DELETE		6.1 TITLE <input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

1.2 NAME <b>LEON WHITE JR</b>	1.3 STREET ADDRESS <b>3150 CASTLE ROCK CIRCLE</b>	1.4 CITY-ST-ZIP <b>LAND O'LAKES, FL 34639</b>
2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
3.2 NAME <b>DON HINST</b>	3.3 STREET ADDRESS <b>16130 SAGEBRUSH RD</b>	3.4 CITY-ST-ZIP <b>TAMPA, FL 33618</b>
4.2 NAME	4.3 STREET ADDRESS <b>3446 PARKWAY BLVD</b>	4.4 CITY-ST-ZIP <b>LAND O'LAKES, FL 34639</b>
5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-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.

SIGNATURE: Leon White Jr *Leon White Jr* **1/31/98** **(913) 907-0074**

CFR2E037 (10/97)