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NONPROFIT CORPORATION * ¿ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

N05560

(0)

THE FRIENDSHIP BAPTIST CHURCH OF EDGEWATER, FLOR IDA INC.

210 HISSOLS DRIVE EDGEWATER FL 32141-008 EDGEWATER FL 32141-008 S. Duet Incorporation or Updamies Long Place of Business Long Mailing Address S. Certificate of Status Desired S. F. Additional Process S. Duet Incorporation or Updamies S. Certificate of Status Desired S. F. Additional Process S. Certificate of Status Desired S. F. Additional Process S. Duet April R. P. S. Duet R. Duet R. P. S. Duet R. P. S. Duet R.	Ì	2106 HIBISCUS DRIVE 2106 HIBISCUS DRIVE									i\$ 0 3 0 0	U\$U\$ U U	
2. Principal Place of Business 2a. Mailing Address 5. Certificate of Status Desired S8.75 Addition								10/01	/1984			Applied For	
Sulte, Apt. #, etc.	ı							59-24	l62411			Not Applicable	
City & State Z7				⊢ ř	g Address			5. Certificate	of Status Desired				
Zip	City & State			27									
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 MCCARDEL, TIMOTHY C 2108 HIBRIDUS DRIVE 18 S.C. 4.5 2108 HIBRIDUS DRIVE 18 S.C. 4.5 2108 HIBRIDUS DRIVE 18 S.C. 4.5 211. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statules, the above-named corporation submits his statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's bloader of directors. I hereby accept the appointment as registered agent, and a capital provision of Section 617,0503, Florida Statules, the above-named corporation submits his statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statules, the above-named corporation submits his statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statules, the above-named corporation submits his statement for the purpose of changing its registered agent and the submits with a submit and the submits of the purpose of changing its registered agent and the submits with a submit and the submits with a submit and the				28									
MCCARDEL, TIMOTHY C 2108 HBBGUS DRIVE EDGEWATER FL 32141-4008 11. Pursuant to the provisions of Sections 617,0502 and 617,1509, Fiorida Statutes, the approximate or properties agent, or both, in the State of Florida, Such change was authorized by the 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. Thereby accept the appointment as registered of the registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered of the registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered of the appointment as registered of the properties of the appointment as registered of the appointment as registered of the appointment as registered agent, and the appointment as registered of the appointment as registered of the appointment as registered of the appointment as registered agent, and the appointment as registered agent appointment as registered agent appointment as registered agent appointment as re						ry		1 · · · · · · · · · · · · · · · · · · ·					
MCCARDEL, TIMOTHY C 2108 HIBIGUS DRIVE EDGEWATER FL 32141-4008 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617,0502 and 617.1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered agent, and accept the obligations of, Section 617,0503, Florida Statules. SIGNATURE Signature, byear or printed name of registered agent and title if applicable. POTE: Registered Agent signature requisiting but the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 617,0503, Florida Statutes. SIGNATURE Signature, byear or printed name of registered agent and title if applicable. POTE: Registered Agent signature requised when remaining) DATE 12. OFFICERS AND DIRECTORS IN 12. TITLE D	9. Name and Address of Current Registered Agent												
EDGEWATER FL 32141-4008 84 City FL 85 Zip Code	I						e						
STREET ADDRESS CITY-ST-ZIP Change Addition DELETE Addition DELETE Change Addition DELETE DELETE Change Addition DELETE DE		MCCARDEL, TIMOTHY C 2108 HIBIGUS DRIVE HIBISCUS					et Addre	Address (P.O. Box Number is Not Acceptable)					
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 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, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, byed or presed rame of registered agent and title if applicable. OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE D	Ì	EDGEW/	ATER FL 32141-4008						·				
SIGNATURE Signature, bysed or printed name of registered agent and 100 if applicable. (NOTE: Registered Agent diphature required when reinstation) DATE					8	4 City	***		ı	FL	85 Zi	p Code	
Signature, typed of printed rame of registered agent and life if applicable. (NOTE: Registered Agent eignature required when refracting) DATE		11. Pursuant office or reagent, I a	to the provisions of Sectlons 617.050 egistered agent, or both, in the State m familiar with, and accept the oblig	es, the about outhorized orida Statut	ve-name by the co es.	ed corpo orporatio	ration submits the n's board of dire	nis statement for the ectors. I hereby according	purpose o	of changing pointment	its registered as registered		
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	ļ	CITY-ST-ZIP	EDGEWATER FL.		- 1		, 20	·					

6.4 CITY - ST-ZIP 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 cath; 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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

TITLE

NAME

STREET ACCRESS

CITY-ST-ZIP

DELETE

Change

___ Addition

FILED

Feb 06 1998 8:00am

Secretary of State