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FILED
Jun 01 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N16362 (8)

1. Corporation Name
ELIM BAPTIST CHURCH, INC.

Principal Place of Business	Mailing Address
RT. 2 BOX 560 FT. WHITE FL 32038	P O BOX 448 FT. WHITE FL 32038 US

3. Date Incorporated or Qualified: 08/14/1986

4. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

2. Principal Place of Business (21) | 2a. Mailing Address (26)

Suite, Apt. #, etc. (22) | Suite, Apt. #, etc. (27)

City & State (23) | City & State (28)

Zip (24) Country (25) | Zip (29) Country (30)

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

MARTIN, J WILLIE
RT 3 BOX 5707
FT. WHITE FL 32038

10. Name and Address of New Registered Agent

81 Name: WILSON, RUSSELL
82 Street Address (P.O. Box Number is Not Acceptable): RT. 4 BOX 5190
83
84 City: FT. WHITE FL 85 Zip Code: 32038

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: X Russell Wilson (RUSSELL WILSON) 5/27/98
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	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	BRADLEY, GEORGE		1.2 NAME		
STREET ADDRESS	P.O. BOX 735 N/A		1.3 STREET ADDRESS		
CITY-ST-ZIP	FT. WHITE FL		1.4 CITY-ST-ZIP		
TITLE	D	☒ DELETE	2.1 TITLE	D	☐ Change ☒ Addition
NAME	MARTIN, WILLIE		2.2 NAME	WILSON, RUSSELL	
STREET ADDRESS	RT 3 BOX 5707		2.3 STREET ADDRESS	RT. 4 BOX 5190	
CITY-ST-ZIP	FT. WHITE FL		2.4 CITY-ST-ZIP	FT. WHITE, FL 32038	
TITLE	D	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	THOMPSON, HAROLD		3.2 NAME		
STREET ADDRESS	RT 3 BOX 3372		3.3 STREET ADDRESS		
CITY-ST-ZIP	FT. WHITE FL		3.4 CITY-ST-ZIP		
TITLE	T	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	HAWKINS, GWENDOLYN		4.2 NAME		
STREET ADDRESS	RT. 2 BOX 5225		4.3 STREET ADDRESS		
CITY-ST-ZIP	FT. WHITE FL		4.4 CITY-ST-ZIP		
TITLE	S	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	PORTER, ANNIE L.		5.2 NAME		
STREET ADDRESS	RT. 2 BOX 4960		5.3 STREET ADDRESS		
CITY-ST-ZIP	FT. WHITE FL		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (10/97)

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: X Russell Wilson (RUSSELL WILSON) 5/27/98 (904) 497-4704