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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N39436

1. Corporation Name

WOMEN SET FREE MINISTRY, INC.

SET FREE RESCUE MISSION INC.

Principal Place of Business

1825 30TH AVE. W.
BRADENTON FL 34205

Mailing Address

4230 26TH STREET W.
BRADENTON FL 34205



2. Principal Place of Business

21 **1825-30-AVE. WEST**

2a. Mailing Address

26 **501 VILLAGE GREEN PKWY**

3. Date Incorporated or Qualified

07/16/1990

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

65-0216564

Applied For

Not Applicable

City & State

23 **BRADENTON, FL**

City & State

28 **BRADENTON, FL**

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

Zip

Country

24 **34205**

25 **FLORIDA**

Zip

Country

29 **34209**

30 **FLORIDA**

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

XAVIER, ROBERT F.
8113 18TH AVENUE EAST
PALMETTO FL 34221

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

TITLE **P** ☐ DELETE

NAME **XAVIER, ROBERT F.**
STREET ADDRESS **8113 18TH AVE. EAST**
CITY-ST-ZIP **PALMETTO FL**

TITLE **D** ☒ DELETE

NAME **BACON, ELOUISE W.**
STREET ADDRESS **1109 8TH ST. CT. WEST**
CITY-ST-ZIP **BRADENTON FL**

TITLE **ST** ☐ DELETE

NAME **WILLARD, PATSY R.**
STREET ADDRESS **1825 30 AVE WEST**
CITY-ST-ZIP **BRADENTON FL**

TITLE **D** ☐ DELETE

NAME **ERICKSON, RICHARD E.**
STREET ADDRESS **5611 40TH AVE. EAST**
CITY-ST-ZIP **BRADENTON FL**

TITLE **D** ☐ DELETE

NAME **ENNIS, GENE**
STREET ADDRESS **1505 WILLOW OAK CIRCLE**
CITY-ST-ZIP **BRADENTON FL**

TITLE **D** ☒ DELETE

NAME **SMITH, MARGARET**
STREET ADDRESS **1602 21ST ST. W.**
CITY-ST-ZIP **BRADENTON FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **ST EXECUTIVE DIRECTOR** ☐ Change ☒ Addition

1.2 NAME **MIKE BAKER**
1.3 STREET ADDRESS **348 52N STREET WEST**
1.4 CITY-ST-ZIP **PALMETTO, FL 34221**

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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, with all other like empowered.

SIGNATURE: **Robert F. Xavier** **ROBERT F. XAVIER PRESIDENT** **01/14/99 795-5575** (941)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)