FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



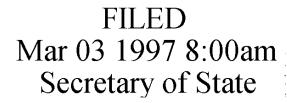
FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9400002433 (0)

FIRST BAPTIST CHURCH OF WALDO, INC.





Principal Place of Business Mailing Addres		Mailing Address	SS .		I IDBAIKOK DIE ICHIL BOARI BOARI DARKI A	T LODGINGE DER HERIN DONN BONN BONN DAWN BONN DONN DONN DIE HALL HADN		
POST OFFICE BO WALDO FL 32694	DX 216	POST OFFICE BOX 216 WALDO FL 32694-0216						
					3. Date Incorporated or Qualified 05/11/1994	3a. Date of La: 02/22/1		
	ace of Business	28. Mailing Address			4. FEI Number		Applied For	
21		26			59-1864019		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	<u> </u>		5. Certificate of Status Desired	S8.75 Additional Fee Required		
City & State		City & State	├ 		Election Campaign Financing Trust Fund Contribution	ncing \$5.00 May Be Added to Fees		
Zip	Country	Zip	Cou	intry	8. This corporation has liability for inta			
24	25	29	30	•		res No	, d. 100.00£,	
	9. Name and Address of Curr]	10. Name and Address of New Regis	stered Agent		
				81 Name)			
BROWN	ALICE			00 0	(D.O. B. N. L. L. L. May A. L. May A			
	VBERRY ROAD STE. F			82 Street Address (P.O. Box Number is Not Acceptable)				
GAINESVILLE FL 32607				83				
CANTEST	- CO2007			84 City		85 2	Zip Code	
		***************************************				FL 8		
SIGNATURE	m familiar with, and accept the ob				d corporation submits this statement for the purp rporation's board of directors. I hereby accept to re required when reinstating)	DATE		
12.	OFFICERS A	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER			
TITLE	T	L. DELETE	1.1 Ti	TLE		Chan	ge L Addition	
NAME	HUGULEY, JOHN MR.		1.2 N	AME	1			
STREET ADDRESS	48 NW 3RD STREET			TREET ADDRESS				
CITY - ST - ZIP	WALDO FL 32694	T DECEME		ITY-S1-ZIP		I Chee	as I delition	
TITLE	T	DELETE	2.1 Ti			∐ Chan	ge Addition	
NAME	KELLEY L.C. MR.		2.2 N					
STREET ADDRESS	302 NW 1ST AVE.			TREET ADDRESS	- +			
CITY - ST - ZIP TITLE	WALDO FL 32694	DELETE	3.1 71	CITY-ST-ZIP		Char	ge Addition	
NAME	BROOKER, BETTY MS.	_ 0	3.7 N				e- had rightion	
STREET ADDRESS	162 SE 1ST AVE.			rivic Treet address				
CITY-ST-ZIP	WALDO FL 32694		- E	ireet adoress XTY+ST-ZIP				
TITLE	TINLUV I L VEUST	☐ DELETE	41 T			Char	ge	
NAME		_	4.21	IAME				
STREET ADDRESS				Treet address				
CITY-SI-Z-P			1	ITY-ST-ZIP				
THILF		DELETE	5.1 T			Char	ge Addition	
NAME			5.2 N	AME				
STREET ADDRESS			5.3 S	TREET ADDRESS				
CITY-ST-ZIP				ITY - ST - ZIP				
TITLE		DELETE	6.1 T	· · · · · · · · · · · · · · · · · · ·		Char	ge 🔲 Addition	
NAME			6.2 N	AME				
STREET ADDRESS				TREET ADORESS	. [
CITY-ST-ZIP				ITY-ST-ZIP				

14. I do 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

MANATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #0011995

Date