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

**NONPROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # N9400006001

THE FLORIDA STATE ASSOCIATION OF FREE WILL BAPTI STS, INCORPORATED

Principal Place of Business 2156 54TH AVENUE VERO BEACH FL 32966

2. Principal Place of Business

Suite, Apt. #, etc.

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Mailing Address

2156 54TH AVENUE VERO BEACH FL 32966

2a. Mailing Address

Suite, Apt. #, etc.

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## **FILED** Feb 18, 1999 8:00am **Secretary of State**

02-18-1999 90041 031 \*\*\*\*61.25

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3. Date Incorporated or Qualifed

12/05/1994

59-2386615

4. FEI Number

								\$8.75 A	1-121	
City & State		City & Sta	ate			5. Certificate of Status Desired		Fee Req		
Zip	Country Zip			Country		6. Election Campaign Financing		\$5.00 M Added to		
24	25 29 3			,		Trust Fund Contribution		rees		
	9. Name and Address of Curren	t Registered Age	nt	100		10. Name and Address of New	Kedizieiec	Agent		
	• '			81	Name					
BRYANT, RANDALL REV. 2156 54TH AVENUE VERO BEACH FL 32966					Street Address (P.O. Box Number is Not Acceptable)					
					City			85 Zip C	ode	
				84	•	Address of the day of the first the	F		9, 1, 4, 10, 1	
office or r agent. I a	to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the obligation	of Florida, Such ci	rande was authorizi	O DV	the corporation	oration submits this statement for the on's board of directors. If hereby accessions to the control of the cont	हिंदी है।			
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable.	(NOTE: Register	d Agen	t signature require	d when reinstating)	DATE		30.151.40	
12.	OFFICERS AN	ID DIRECTORS	13	•		ADDITIONS/CHANGES TO OF	FICERS A			
TITLE	D		DELETE 1.1	TITLE		1 3y 394		Change	Addition 1	
NAME	Buser, Lonnie Rev.		1.2	NAME				•		
STREET ADDRESS	5070 PAT PLACE		1.3	STREET	ADDRESS	to weed it				
CITY-ST-ZIP	WEST PALM BEACH FL		1.4	CITY-S1	r-ZIP					
TITLE	D		DELETE 2.1	TITLE				☐ Change	☐ Addition	
NAME	OWEN, TIM REV.		2.2	NAME						
STREET ADDRESS	185 E. HAINES BLVD.		2.3	STREET	ADDRESS					
CITY-ST-ZIP	LAKE ALFRED FL		2.4	CITY-S	T-ZIP					
TITLE	D		DELETE 3.1	TITLE				☐ Change	Addition	
NAME	BRYANT, RANDALL REV		3.2	NAME					,	
	2156-54TH AVENUE		3.3	STREET	ADDRESS			• •		
CITY-ST-ZIP	VERO BEACH FL		3.4	CITY-S	T-ZIP					
TITLE	D		DELETE 4.1	TITLE				Change	☐ Addition	
NAME .	COLLINS, TOM		4. 2	NAME		de les significacións de	184 1 11	64. 83.00 \$6.123	erender gab.	
STREET ADDRESS	0040 04148#EN OIDOLE	•	4.3	STREET	ADDRESS			5. 计编数	뛤뛜첉	
CITY-ST-ZIP	AUBURNDALE FL		4.4	CITY-S	T-ZIP	र है। सर्वीत को रेवर्न के कि	al Bloker		(i) (i) (i) (i)	
TITLE			DELETE 5.1	TITLE			9.	Change	Addition	
NAME			5.2	NAME		•	,			
STREET ADDRESS			5.3	STREET	ADDRESS	D Tro		· · · · · ·		
CITY-ST-ZIP	\$		5.4	CITY-S	T-ZIP	1. 166. Mg V				
TITLE	x		DELETE 6.1	TITLE				☐ Change	☐ Addition	
NAME	6 At		6.2	NAME		AND STATE OF THE S				
STREET ADDRESS	de la		6.3	STREET	TADORESS	·			•	
·.	2			ÇITY-S						
CITY-ST-ZIP	certify that the information supplied w	ith this filing does	not qualify for the ex	empt	ion stated in	Section 119.07(3)(i), Florida Statutes	. I further c	ertify that the in	formation	

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under oam; 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:

Revo Randall Bryant 1/27/99

(561)567-1956

Applied For

Not Applicable