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 # 713800

(1)

FIRST BAPTIST CHURCH OF FORT MYERS BEACH, FLORID A. INC.

A, INC	<i>)</i> ,]	BB	<u> </u>	
Principal Plac	ce of Business		Mailing Addr	ess					4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	AN BIBU DILU HAN	
P.O. BOX 2402 P.O. BOX 2402 FT. MYERS BEACH FL 33932 FT. MYERS BEACH FL 33932					332-2402				-		
								3. Date Incorporated or Qualified 12/14/1967	3a. Date of Las 02/21/	st Report /1996	
2. Principal Place of Business 2a. Mailing Address								4. FEI Number		Applied For	
21		26					59-2495484		Not Applicable		
Suite, Apt.	. #, etc.		Suite, Apt	#, etc.				5. Certificate of Status Desired		5 Additional	
City & Star	40	27 City P. Cto	City & State						Required		
23		<u>.</u>	28	<u></u>	r	••		6. Election Campaign Financing Trust Fund Contribution	☐ Add	00 May Be led to Fees	
Zip	ļ	Country	Zip			untry		8. This corporation has liability for		ər s. 199.032,	
24	25 Name 25	Address of Curren	1 Pagistared Ages		30			Florida Statutes 10. Name and Address of New Re	Yes No		
	W. Maine and	Address of Collen	r nagistered Agei	<u>"</u>		81	Name -		gistered Agent		
001017								ck D. Houston			
BEASLEY, WILLIAM O 380 PALERMO CIRCLE						82		reet Address (P.O. Box Number is Not Acceptable) 3810 Estero Blvd.			
SBO PALERMO CIRCLE FT. MYERS BEACH FL 33931						83					
TI. MICHO DEMONITE 00801								Ft. Myers Beach, FI 33931			
•	•	-				84	City F-+	/ Myers Beach,	FL 85 3	Zip Code 3 3931	
11. Pursuant	the provisions	of Sections 617.050	2 and 617.1508, FI	orida Statut	es, the a	bove-	named cor	poration submits this statement for the	purpose of changir	g its registered	
agent. I	registered agent, am fantiliar with, a	or both in the state and adcept the abliga	of Florida. Such of ations of Section 6	iange was a 17.0503, Fid	authorize orida Sta	ed by t stutes.	the corpora	poration submits this statement for the ation's board of directors. I hereby acce	pt the appointment	, as registered	
SIGNATURE		Mala	usta	~				1-27	-97		
	Stature, typed or pr		nt and title i applicable.	(NOT		d Agent	signature requ	uired when reinstating)	DATE		
12. TITLE		OFFICERS AND		DELETÉ	13.			ADDITIONS/CHANGES TO OFFI	CERS AND DIRECT		
	TD SPOWAL III	ri el	*1:40	DECEIE	1,11			RINGER BY MENTALS Y	L_1 Chan	ige XX Addition	
NAME STREET ADDRESS	BROWN, H				1.2 N		DORESS	A KK XIX BIXING KOX XXX K X			
STREET ADDRESS 160 GULF ISLAND DRIVE CITY-ST-ZIP FT. MYERS BCH. FL								英英英英英英英英英英英英英英英英英			
TITLE	PDC	DUTI, FL		RELETE	2.1 T	HTY-ST-	- 212		Chan	ige K KAddition	
NAMĚ	BEASLEY,	WILLIAM O		Maccia	2.2 N			Member Vernon J. Latta		80 (23 100 100	
STREET ADDRESS	380 PALER		.			j j	10 Donora				
CITY-ST-ZIP FT. MYERS BCH FL				2.4 CITY-ST-ZIP			DDI.E.00	Ft. Myers bEach, FL 33932			
TITLE	D			DELETE	3.1 T			A**	☐ Chan	ige Addition	
NAME	1	JERALD L , S	ecretary		3 2 N	IAME	(
STREET ADDRESS			2		3.3 \$	TREET A	DORESS				
CITY-ST-ZIP	FT MYERS				3.4. (CITY-ST	- ZIP				
TITLE	D		83	C DELETE	4.1 7	TLE			☐ Chan	ige 🔲 Additio	
NAME '	ESCUE, AV			*	4.21	MAME					
STREET ADDRESS	8000 BUCA				4.3 S	TREET A	.DDRESS		_		
CITY-ST-ZIP	FT MYERS			00.555		HY-SI-	ZIP				
TITLE		rustee Ch	airman 🗀	DELETE	5.1 T		Ì		L Chad	ge 🔲 Addition	
NAME	HOUSTON,				5.2 N				X	Julille	
STREET ADDRESS	3810 ESTE					TREET A	· · · · · · · · · · · · · · · · · · ·		4	ר ועוואר:	
CITY-ST-ZIP	FT MYERS	BEACH FL		DELETE		HTY-ST-	ZIP	gen's gen's gen's shows are a comp. At the	- 4 - 3 - 1 - 1	ion Addition	
TITLE	ľ		L_	Utitit	6.1 T		l	00000215 -04/23/97010	> <u>4. 左こばれ</u> り ^{ran} ロ2ロ14	na 🗀 vaaitioi	
NAME STREET ADODESS	ì				6.2 N	IAME TOTALA	DDbrae	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	04014		

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 occurry of justice 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 or an attachors with an address.

SIGNATURE:

CITY-ST-ZIP

1-26-97

941-463-4280

FILED

Apr 21 1997 8:00am

Secretary of State

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