FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90067 012 ****70.00

DOCUMENT # 717281

1. Corporation Name

SEMINOLE FIRST BAPTIST CHURCH, INC.

Principal Place of Business
11045 PARK BOULEVARD
SEMINOLE FL-34643-2

LARGO FL 33777

Mailing Address

11045 PARK BOULEVARD SEMINOLE FL 34642<

Principal Place of Business The Principal Place of Business	2a. Mailing Address		3. Date Incorporated or Qualifed 10/01/1969		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		4. FEI Number	Applied For	
22	27		59-6045890	Not Applicable	
City & State	City & State		5. Certifcate of Status Desired	\$8.75 Additional Fee Required	
Zip Country 24 33772 [25]		ountry	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
	<u></u>	81 Name			
WILLIAMS, PEGGY		82 Street Add	iress (P.O. Box Number is Not Acceptable)		
7885 BAYOU CLUB BLVD		1			

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.

City

agont. 1 c	and iditing with and accept the obligation of accept					
SIGNATURE	Signature, typed or printed name of registered agent and title if applica	ble. (NÖTE: R	Registered Agent signature required	d when reinstating) DAT	re	
12.	OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICER			
TITLE	VD	DELETE	1.1 TITLE		Change	Addition
NAME	HERRINGTON, KATE		1.2 NAME			
STREET ADORESS	l = : = = = = = = = = = = = = = = = = =		1.3 STREET ADDRESS			
CITY-ST-ZIP	SEMINOLE.FL		1.4 CITY-ST-ZIP			
TITLE	SD	DELETE	2.1 TITLE		☐ Change	☐ Addition
NAME	WEIDNER, FOY MAE		2.2 NAME			
STREET ADDRESS	11053 69TH AV. NO.		2.3 STREET ADDRESS			
CITY-ST-ZIP	SEMINOLE FL 34642		2.4 CITY-ST-ZIP			
TITLE	PT	☐ DELETE	3.1 TITLE	•	Change	Addition
NAME	WILLIAMS, PEGGY		3.2 NAME			
STREET ADORESS			3.3 STREET ADDRESS			
CITY-ST-ZIP	LARGO FL 33777		3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		☐ Change	☐ Addition
NAME			4 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP	_		4.4 CITY-ST-ZIP		<u> </u>	
TITLE		☐ DELETE	5.1 TITLE		Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change	Addition
NAME	1		6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
	1		EAOTH ST 7ID			

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 comporation 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:

SIGNATURE EQUIDED Mar. 7, 1999 727-391-3380
SIGNATURE DISTRICTION DOS DESCRIPTION DAYLING PROPERTY OF THE PROP

CR2E037 (11/98

Zip Code