DOCUMENT # 700458  1. Entity Name						FILED				
MYRTLE GROVE BAPTIST CHURCH INC						00 FEB 28 PM 3: 13				
Principal Place of Business Mailing Address`						SI	CRETARY LATICISE	OF STA	TE NBA	
5920 LILLIAN WAY PENSACOLA FL 32508		PO BOX 3159 PENSACOLA FL 32516-3159* US				· <del>-</del> · <u>-</u> · <u>-</u> · ·	a.			
							ii 1012 1512 1114 1		TI J BARNIN BARNIN BAN	
2. Principa) F	Place of Business .	3. Mailing Address				in erin een ener e				
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			high	U DONOTW	BITE IN THIS	\$25 J	BU1.25	
City & Stat	te .	City & State			4. FEI Number Applied For Not Applicable					
Zip	Country .	Zip Country				- 75. Cértificate of Status Desired - S. S. 75. Additional Fee Required				
	6. Name and Address of Current	t Registered Agent		Nama		7. Name and	Address of New	Registered	Agent	
MANN, AN 805 N 57T PENSACO		,		Street Add	dress (I	P.O. Box Number	is Not Acceptat	FL	Zip Cod	le
SIGNATURE	ANNE N. H Signature, typed or printed name of registered agen  FILE NOW: FEE IS \$61.25	s and title if applicable. (NOTE:  9. Election Campaign I Trust Fund Contribut	Financir		\$5.0	when reinstating)  O May Be		J/R-/Z- DATE DATE DEPARTMEN	Payable to	<b></b>
10.	OFFICERS AND DI		11.			ADDITIONS/CHA	NGES TO OFFIC	CERS AND D		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HORACE G NEALY (II 3101 LAS BRISAS DR PENSACOLA FL 32526	E <b>X</b> Delate		ET ADDRESS	M 1 108	SINGAT TURE II D T E MA EMSALULA G IZRESIK	AUIS AISON DR		Change	☐ Addition
TITLE NAME STREET ADDRESS* CITY-ST-ZIP	VD JOHNSON, FRANK W 12011 LILLIAN HWY- PENSACOLA FL 32508	S/Delete		<i>V(</i> )	EA.	e Dresid publikoy igg in s enshedu	STE NUE	. <del></del>	_a-enange	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ANNE N MANN 807 N 57TH AVE PENSACQLA FL 32508	☐ Delate							☐ Change	☐ Addition
TITLE NAME . STREET ADDRESS CITY-ST-ZIP	D SARDER, IVAN V 12 N. 72 AVE PENSACOLA FL 32508	<b>S</b> af Delete						· · · · · · · · · · · · · · · · · · ·	Change	☐ Addition
TITLE NAME	T MANN, ANNE N 807 N. 57TH AVE	SST Delste	TITLE NAME STREE					<del>-</del> ·	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PENSACOLA FL 32506	. Delete	TITLE NAME STREE						☐ Change	Addition
12. I hereby of indicated of the correction changed,	pertify that the information supplied will on this report or supplemental report I poration or the receiver or trustee empor or on an attachment with an address.	s true and accurate and that my owered to execute this report as	he exer	mption stated ure shall have ed by Chapt	e the s er 617	same legal effect , Florida Statutes	as if made under and that my na	er oath; that I me appears i	am an officer in Block 10 or	or director [
SIGNAT		PRINTED NAME OF SIGNING OFFICER OF	R DIRECT		W W	m 1/2	SZ000 Date	850	Deytime Phone #	<u> </u>