FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

701803

(9)

CAROL ESTATES BAPTIST CHURCH INC

CAHOL ESTATES BAPTIST CHURCH INC									
Principal Place of Business			Mailing Address					# 1881) Jahri Barat Didas Jahri Barah Brah Brah Brah Brah Brah Brah Bra	
2020 N E 15TH STREET GAINESVILLE FL 32609			2020 N E 15TH STREET Gainesville fl 32609					3. Date Incorporated or Qualified 12/16/1960	
]								4. FEI Number Applied For	
A Disciplina of Disciplina					Address			59-6032860 Not Applicable	
2. Principal Place of Business			26					5. Certificate of Status Desired S8.75 Additional Fee Required	
Sulte, Apt. #, etc.			27	Suite, Apt. #, etc.				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
City & Stat	0			City & State				7. is this nonprofit corporation a homeowners association?	
23			28					☐ Yes ☐ No	
		Country	— • • • •		Country		8. This corporation owes or has paid the current year intangible		
24	A Name	25 Address of Cur	29 Current Registered Agent		30	0		Personal Property Tax due June 30. Yes No	
	P. Name	and Address of Curi	ent wegiste	sea wheur		81	Name	10. Name and Address of New Registered Agent	
LABOY.	JOYCE M.					82		of Address (P.O. Box Number is Not Acceptable)	
39 N.W. 39TH AVE., LOT 143							Sugge	Address (F.O. Box Number is Not Acceptable)	
GAINESVILLE FL 32609						83			
						84	City	FL 85 Zip Code	
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.									
SIGNATURE									
12.	Signature, types	OFFICERS A			13.		ni signature	ure required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	- 0111021107	WID DIVILOT	DELETE		TITLE		Change Addition	
NAME	GUNTER, EMANUE			12 N					
STREET ADDRESS	STREET ADDRESS 1019 NW 30TH /		1.3 \$		STREET	ADDRESS	s \		
CITY-ST-ZIP GAINESVILLE FI						1.4 CITY-ST-ZIP			
TITLE	D			DELETE				D Change Addition	
NAME	BURNS,	THOMAS V. (JR)			2.21	2.2 NAME		Henley, then Donald Change Addition 1832 N.E 10 Drive. Gaines ville Fl 32609	
		E. 17TH TERR.		2.3		STREET	ADDRESS	2832 NE 10 Drive.	
CITY-ST-ZIP	ITY-ST-ZIP GAINESVILLE PL'					CITY-S	ST-ZIP	Gaines ville Fl 32609	
TITLE	l D			DELETE 3.1 TI		ITLE		Change Addition	
NAME						MAME			
STREET ADDRESS				3.3		STREET	ADDRESS		
CITY-ST-ZIP	GAINES	VILLE FL 32605		1		CITY-S	T-ZIP		
TITLE	T	181105 11		☐ DELETE		TITLE		Change Addition	
NAME		JOYCE, M				NAME			
STREET ADDRESS 39 NW 39TH LOT 143 CITY-SI-ZIP GAINESVILLE FL						ADDRESS			
TITLE GAINESVILLE		VILLE FL		☐ DELETE	4.4 CITY- TE 5.1 TITLE		T-ZIP	Change C Addition	
i				□ ottere				☐ Change ☐ Addition	
NAME CONFET ADDRESS						NAME	4000000		
STREET ADDRESS							ADDRESS .	?	
CITY-ST-ZIP TITLE				DELETE		HTLE	1-211	Change Addition	
NAME						MAME			
STREET ADDRESS							ADDRESS		
CITY-ST-ZIP					1	CITY-S			
3111 97 8"					0.4 (- <u> </u>	

4. Thereby certify that the information supplied with this fiting 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:

e m. Labor

4-2-98

2E037 (10/97)

FILED

Apr 09 1998 8:00am

Secretary of State