## 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 # 703226 1. Corporation Name

### DERBYSHIRE BAPTIST CHURCH, INC.

Principal Place of Business 1127 DERBYSHIRE RD. HOLLY HILL FL 32117-1813

2. Principal Place of Business

Mailing Address

2a. Mailing Address

1127 DERBYSHIRE RD HOLLY HILL FL 32117-1813

# FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90075 047 \*\*\*\*61.25

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3. Date Incorporated or Qualifed

21		26					11/20/1961				
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				4. FEI Number		App	lied For	
22	<u> </u>	27		_			59-1486534		Not	Applicable	
City & Stat	e	28	City & State				5. Certifcate of Status Desired	]	\$8:75 A		
Zip	Country	1201	Zip	Country	,		6. Election Campaign Financing		\$5.00	May Be	
24	25	29	· _	30			Trust Fund Contribution	]	Added to	•	
	9. Name and Address of Current						10. Name and Address of New Reg	Istered A	jent		
•				81	Nar	16					
TODD, RONALD L					99) Street Address (B.O. Box Number is Not Acceptable)						
, , , , , , , , , , , , , , , , , , ,					82 Street Address (P.O. Box Number is Not Acceptable)						
6163 SEQUOIA DR PORT ORANGE FL 32127					1						
PURI UKANGE FL 32121					L.			<del> </del>			
				84	City			FL	85 Zip C	ode	
11. Pursuant	to the provisions of Sections 617.0502	and 6	17.1508. Florida Statute:	s, the abov	e-nam	ed corpo	oration submits this statement for the pu	rpose of ch	anging its	egistered	
office or r	egistered agent, or both, in the State of	f Florid	a. Such change was au	thorized by	the co	orporatio	n's board of directors. I hereby accept to	he appoint	ment as reg	istered	
_	m familiar with, and accept the obligation	ons of,	Section 617.0003, FIOR	ua							
SIGNATURE	Signature, typed or printed name of registered agent	and title i	f anoticable. (NOTE:	Registered Age	nt signat	re required	when reinstating)	DATE			
12.	OFFICERS AND		· · · · · · · · · · · · · · · · · · ·	13.			ADDITIONS/CHANGES TO OFFICE	ERS AND	DIRECTO	RS IN 12	
TITLE	PD		DELETE	1.1 TITLE	•				Change	Addition	
NAME	TODD, RONALD Ł			1.2 NAME							
STREET ADDRESS				1.3 STREE	TADDRE	ss					
CITY-ST-ZIP	PORT ORANGE FL			1.4 CITY-S							
TITLE	SD		☐ DELETE	2.1 TITLE					Change	Addition	
NAME	WOOD, HERB			2.2 NAME							
STREET ADDRESS				2.3 STREE	TADDRE	ss					
	HOLLY HILL FL		,	2. 4 CITY-1							
CITY-ST-ZIP	TT		☐ DELETE /	3.1 TITLE	01- <u>21</u>	$\top$			Change	Addition	
NAME	OWINGS, FRED			3.2 NAME							
STREET ADDRESS				3.3 STREE	TADDRE	ss					
CITY-ST-ZIP	HOLLY HILL FL			3.4. CITY-							
TITLE	T		DELETE	4.1 TITLE		$\neg$			Change	☐ Addition	
NAME	RAINWATER, DAVID		* =	4. 2 NAME			_				
STREET ADDRESS				4.3 STREE	•	ss					
CITY-ST-ZIP	HOLLY HILL FL			4.4 CITY-S		-					
TITLE	T		☐ DELETE	5.1 TITLE		_			Change	Addition	
NAME	DUCKETT, DOUG		<del></del>	5.2 NAME							
STREET ADDRESS				5.3 STREE	T ADDRE	ss					
CITY-ST-ZIP	ORMOND BEACH FL			5.4 CITY-S	ST-ZIP		,				
TITLE	D DEACH FE		☐ DELETE	6.1 TITLE		1	· · · · · ·		Change	☐ Addition	
NAME	FIELD, A.D.		_	6.2 NAME							
STREET ADDRESS	1			6.3 STREE	TADOR	ss					
	I			6.4 CITY-S							
14. I hereby	DAYTONA BEACH FL certify that the information supplied with	h this fi	ling does not qualify for	the exempt	tion sta	ted in S	ection 119.07(3)(i), Florida Statutes. I fu	rther certif	y that the ir	formation	
indicated	on this annual report or supplemental	annual	report is true and accur	ate and the	it my s	ignature	shall have the same legal effect as if m	ade 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 chapged, or on an attachment with an address, with all other like empowered.