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Feb 03, 1999 8:00am
Secretary of State

NONPROFIT CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

02-03-1999 90023 022 *****61.25

DOCUMENT # 704028

1. Corporation Name

FIRST BAPTIST CHURCH OF COTTONDALE, INC.

Principal Place of Business

POST OFFICE BOX 128
 MAIN AND PARK STREET
 COTTONDALE FL 32431

Mailing Address

POST OFFICE BOX 128
 MAIN AND PARK STREET
 COTTONDALE FL 32431



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

05/11/1962

22 City & State

27 City & State

4. FEI Number
 59-2326155

Applied For
 Not Applicable

23 Zip

Country

28 Zip

Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

24

25

29

30

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

JOHNS, DON
 2583 DOGWOOD DR.
 P. O. BOX 341
 COTTONDALE FL 32431

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE
 NAME D YON, HILTON
 STREET ADDRESS 2750 WHY. 231
 CITY-ST-ZIP COTTONDALE FL

1.1 TITLE Change Addition
 1.2 NAME
 1.3 STREET ADDRESS
 1.4 CITY-ST-ZIP

TITLE DELETE
 NAME D REEVES, DOYLE
 STREET ADDRESS 3188 MAIN STREET
 CITY-ST-ZIP COTTONDALE FL 32431

2.1 TITLE Change Addition
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP

TITLE DELETE
 NAME D REGISTER, ELTON
 STREET ADDRESS 2643 MILTON STREET
 CITY-ST-ZIP COTTONDALE FL

3.1 TITLE Change Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

TITLE DELETE
 NAME D JOHNS, DON
 STREET ADDRESS 2583 DOGWOOD DRIVE
 CITY-ST-ZIP COTTONDALE FL

4.1 TITLE Change Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

TITLE DELETE
 NAME D DIESNER, BRUCE
 STREET ADDRESS 2886 BUTTERCUP LANE
 CITY-ST-ZIP COTTONDALE FL

5.1 TITLE Change Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

6.1 TITLE Change Addition
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-ST-ZIP

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 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED Don Johns

1/15/99

(850) 352-4245

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/98)