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**NONPROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # 704585**

## **FILED** Feb 17, 1999 8:00 am § Secretary of State

02-17-1999 90015 039 \*\*\*\*61.25

FIRST E	BAPTIST CHURCH OF MOC	ORE HAVEN, INC.						
Principal Place of Business Mailing Address								
AVE "J" AND		AVE "J" AND 3RD ST				<b>                                    </b>		
PO BOX 566 PO BOX 566								
MOORE HAVE	EN FL 33471	MOORE HAVEN FL 33471			\$ JEDIJU IBOJE BOJEJ ALBEN DJEDI ER	IBS BSII BIBIS	OYOTH BIBIT EIGHT BIB	ti binit indi
					<i>\$</i>			
2. Principal F	Place of Business	2a. Mailing Address			3. Date Incorporated or Qualifec	1		
— ·	Flace of Dustriess	26			10/02/1962		•	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			4. FEI Number		App	olied For
22		27			<b>59-1885288</b>	_	No	Applicable
City & Sta	ate	City & State			5. Certifcate of Status Desired		\$8.75 A	
23		28			o. Odimodio di Ciatao Desired		Fee Re	quired
<b>Z</b> ip	Country	Zip	Count	try	6. Election Campaign Financing	п	\$5.00	· ·
24	25]		30	<del>.</del>	Trust Fund Contribution		Added to	Fees
	9. Name and Address of Curre	ent Registered Agent		31 Name	10. Name and Address of New	Register	a Agent	
			l'	Name		_		
SMITH, J			18	32 Street Add	dress (P.O. Box Number is Not Accep	table)	· ·	
AVENUE	O & 6TH STREET		-	33		<del></del>		
MOORE I	HAVEN FL 33471			23				
			1	34 City		· F	85 Zip C	ode
4410	4.7.05	502 and 647 4508 Florida Statuta	as the abo	wo named cor	poration submits this statement for th	o numose	of changing its'	registered
office or	registered agent or both in the Stati	e of Florida. Such change was at	uthorized t	ny the corporal	tion's poard of directors. I hereby acci	ept the apt	xomunent as reg	istered t
agent. I a	am familiar with, and accept the oblig	gations of, Section 617.0503, Flor	rida Statut	es.		yn setrua i	* * * * * * * * * * * * * * * * * * *	a elizo test
agent I a		gations of, Section 617.0503, Flor	nda Statut	es. 	29 jilga - 1955 - 1985 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1	DATE	· · · · · · · · · · · · · · · · · · ·	· ANTO ISE
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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: