FILE NOW: FILING FEE IS \$61.25

Mailing Address

416 ALACHUA STREET

POST OFFICE BOX 1099

FERNANDINA BEACH FL 32035

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 704711

Principal Place of Business

416 ALACHUA STREET

POST OFFICE BOX 1099 FERNANDINA BEACH FL 32035

FIRST BAPTIST CHURCH OF FERNANDINA, FLORIDA

					· ·		
2. Principal P	Place of Business 2a. Mailing Address				Date Incorporated or Qualifed		
21	26				10/24/1962		
	Suite, Apt. #, etc. Suite, Apt. #, etc.				4. FEI Number .	App	olied For
22		27			59-0931262	Not	Applicable 2
City & Stat	te	City & State			5. Certificate of Status Desired		
Zip					6. Election Campaign Financing	\$5.00	Mav Be
24	25 29 36				Trust Fund Contribution	Added to	
	9. Name and Address of Current		-		10. Name and Address of New Registered	Agent	
			81	Name			
DECKUAL	A DAVID H		82	Stroot Ac	ddress (P.O. Box Number is Not Acceptable)	·	
BECKHAM, DAVID H.				Sueerad	udiess (F.O. Box Humber is Not Acceptable)		
416 Alachua Street Fernandina Beach Fl 32034							
FERNANL	JINA BEAUTI PL 32034		-			To a 1 7% C	<u> </u>
			84	City	FL	85 Zip C	ode
11 Duminos	to the provisions of Sections 617 0500	2 and 617 1508 Florida Statutes	the show	e-named co	ornoration submits this statement for the purpose of	f changing its	registered
office or I	registered agent, or both, in the State o	of Florida. Such change was auth	ionzea by	the corpora	ation's board of directors. I hereby accept the appoint	intment as reg	jistered
agent. i a	am familiar with, and accept the obligati	ions of, Section 617.0503, Florida	a Statutes	i.	•		
SIGNATURE					DATE		
	Signature, typed or printed name of registered agent		gistered Ager	nt signature requ	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
12.	OFFICERS ANI	OFFICERS AND DIRECTORS		— г	ABBITIONS/CHANGES TO OF TOERO	☐ Change	☐ Addition
TITLE	1	C) beceive	1.1 TITLE	[27 5,10,195	
NAME	WATSON, WILLIE	1	1.2 NAME				
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP	FERNANDINA BEACH FL		1.4 CITY-S	T-ZIP		Change	Additio
TITLE	 T	☐ DELETE	2.1 TITLE			[_] Change	
NAME	RODETTER, WILLIAM D		2.2 NAME				
STREET ADDRESS	s 218 LIGHTHOUSE DRIVE		2.3 STREET ADDRESS				
CITY-ST-ZIP	FERNANDINA BEACH FL		2.4 CITY-5	ST-ZIP			
TITLE	T DELETE		3.1 TITLE			Change	Additio
NAME	SMITH, ALVIN		3.2 NAME	1	,		
STREET ADDRESS	3688 CHANDLER LANE		3.3 STREE	TADDRESS			
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP			D 1 1 1 1 1 1
TITLE	7	DELETE	4.1 71TLE	1	T-	Change	Additio
NAME	COKER, GENE	/	4, 2 NAME		QUARTERMAN, SHARON TO GREEN HERON WAY FERNANDINA BEACH F	J	
STREET ADDRESS	3410 GUERNSEY COURT		4.3 STREE	TADORESS	TO GREEN HERON WAY		
CITY-ST-ZIP			4.4 CITY-S	T-ZIP	FERNANDINA BEACH FI	<u> </u>	
TITLE	T	☐ DELETE 5.1				Change	itio
NAME	GARNER, DAVID TOD		5.2 NAME				-
STREET ADDRESS		· i	5.3 STREE	T ADDRESS		•	
CITY+ST-ZIP	FERNANDINA BEACH FL		5.4 CITY- S	T-ZIP	<u> </u>		
TITLE	S DELETE 6.11		6.1 TITLE			Change	Additio
NAME	BECKHAM, DAVID H.		6.2 NAME	j			
STREET ADDRESS			6.3 STREE	T ADDRESS			

6.4 CITY-ST-ZIP

SIGNATURE:

FERNANDINA BEACH FL 32034

14. I hereby centify 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 on an attachment with an address, with all other like empowered.

FILED

Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90011 003 ****61.25