FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1998

DOCUMENT # 707771 (2) THE FIRST BAPTIST CHURCH OF DOVER, INC.				2 (400)(1) 300)(1 000)(1 000)(1 100)(1 100)	VIDII AKRIJ ALDIJ AJŠIL AJĀLE JOČE
Principal Place of Business Mailing Address					
		3223 N. GALLAGHER RD.		3. Date Incorporated or Qualified	
DOVER FL 33527		DOVER FL 33527 US		09/08/1964	
••				4. FEI Number	Applied For
9 Principal C	Place of Business	2a. Mailing Address		59-0794392	Not Applicable
21 - Fillicipal F	TROS OF BUSINESS	26		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		6. Election Campaign Financing	\$5.00 May Be
22		27		Trust Fund Contribution	Added to Fees
City & State		City & State		7. Is this nonprofit corporation a homeowner	ers association?
23		28			□ No
Zip	Country	Zip	Country	8. This corporation owes or has paid the or	
24	25 Name and Address of Curren		30	Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name					
PALLIFT NUMB				Wooten	
"BALLIET, PHILIP 8223 N. GALLAGHER ROAD-			82 Street Add	dress (P.O. Box Number is Not Acceptable) W. Sandal wood Dr. N.	
DOVER FL 83527			83		
501611	1 2 40021		00 00		
			84 City Plant	Cita FI	85 Zip Code 33566
11. Pursuant	to the provisions of Sections 617.050	02 and 617.1508, Florida Statute	s, the above-named co	rporation submits this statement for the purpose	of changing its registered
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	VODIO IN 18TH	OTC .		6/7/98	
12.	Sign sure, typod or printed name of registered ago	ent and title if applicable. (NOTE: D DIRECTORS	Registered Agent signature req	uired when reinslating) DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIDECTORS IN 10
TITLE	D OFFICENS AIN	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICEAS AN	Change Addition
NAME	DICKENS, RICHARD		1.2 NAME		
STREET ADDRESS	1526 RANCHERED LANE		1.3 STREET ADDRESS		
CITY-ST-ZIP	PLANT CITY FL 45		1.4 CITY-ST-ZIP		
TITLE	5	DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	DAVIS, CARL		2.2 NAME		
STREET ADDRESS	3307 N GALLAGHER RD		2.3 STREET ADDRESS		
CITY-ST-ZIP	DOVER FL		2, 4 CITY - ST - ZIP		
TITLE	D Mycno orcur	☐ DELETE	3,1 TITLE		Change Addition
NAME	MYERS, STEVE		3.2 NAME		
STREET ADDRESS	11204 LAKE SASSA DR		3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	THONOTOSASSA FL 36	DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		Change Addition
NAME		C prerie	4. 2 NAME		LI Orango LI Rounton
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

14. Thereby 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.

4130/98 813/219-2273

FILED

Jun 11 1998 8:00am

Secretary of State