## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

708686

(1)

BEULAH BAPTIST CHURCH OF LITHIA, FLORIDA, INC.

## **FILED** Apr 28 1997 8:00am Secretary of State



								II .	
Principal Place of Business Mailing Address							i arsı miller bibir gibil bibir aralı Asbil illi	<b>3</b> 1	
5300 BEULAH CH LITHIA FL 33547	URCH ROAD	5300 BEULAH CHURCH ROAD LITHIA FL 33547-2244							
·						3. Date Incorporated or Qualified 03/22/1965	3a. Date of Last Report 04/22/1996		
2. Principal Place of Business		2a. Mailing Address				4. FEI Number 59-2617614	Applied Fo		
21		[26]				39-2017014	Not Applica		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	ired \$8.75 Additional Fee Required		
City & State		City & State				6. Election Campaign Financing	\$5.00 May Be		
23	28				Trust Fund Contribution	Added to Fees			
Zip	Country	Zip		Count	y	8. This corporation has liability for	m <sup>2</sup> 1	2,	
24	25	[29]		30		Florida Statutes	∐ Yes ∐ No		
	9. Name and Address of Current	Hegistered Ag	ent	8	Name	10. Name and Address of New F	egistered Agent		
	Thinks.			ľ	Name	в			
COOK, VE				8:	2 Street	t Address (P.O. Box Number is Not Accept	able)		
2840 NICH			83				· · · · · · · · · · · · · · · · · · ·		
LITHIA FL	33547			•	"				
				8	1 City		FL 85 Zip Code		
11. Pursuant to	the provisions of Sections 617.0502	and 617.1508,	Florida Statut	es, the abo	ve-named	d corporation submits this statement for the rporation's board of directors. I hereby acc		red	
agent. I am	familiar with, and accept the obliga	tions of, Section	617.0503, Flo	orida Statut	95.	political decircle and control of account of the control of account of the control of the contro	opt the appointment to registere		
SIGNATURE								\	
12.	gnature, typed or printed name of registered agen OFFICERS AND		·. (NO1	13.	geni signalu	re required when reinstating)  ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECTORS IN 12	6	
TITLE	S		DELETE	1.1 TITLE		7.DDTTOHQGTTATGES 10 OFF	☐ Change ☐ Add	lition S	
NAME	SOUTHWELL, CHARLES A	-		1.2 NAME				1	
STREET ADDRESS	CAROLINA AVE				T ADDRESS	.		8	
CITY-ST-ZIP	MULBERRY, FL 00000			1.4 CITY				Š	
TITLE	D		DELETE	2.1 TITLE			☐ Change ☐ Add	lition C	
NAME	COOK, VERNON			2.2 NAMI			_ • -		
STREET ADDRESS	2840 NICHOLAS RD.			23 STRE	T ADDRESS	:			
CITY-ST-ZIP	LITHIA FL			2 4 CITY	- ST - ZIP	İ			
TITLE	PD		DELETE	3 1 TITLE			☐ Change ☐ Add	ition	
NAME	COLEMAN, GEORGE L			3.2 NAMI					
STREET ADDRESS	9402 COUNTY LINE RD			3.3 STRE	T ADDRESS				
CITY-ST-ZIP	LITHIA FL			3.4. CITY	- ST - ZIP				
TITLE	TD		DELETE	4.1 TITLE		D	x Change ☐ Add	lition	
NAME	HARRISON, ELBARAE			4. 2 NAM	Ē	Elbarae Harrison			
STREET ADDRESS	11809 LITHIA-PINECREST			4.3 STRE	T ADDRESS	1		Ì	
CITY-ST-ZIP	LITHIA FL			4.4 CITY	ST-ZIP				
TITLE			DELETE	5.1 TITLE		T	☐ Change 😾 🗚 dd	lition	
NAME				5 2 NAM		Gerald Hall			
STREET ADDRESS				5.3 STRE	t address	8902 Pritcher Rd.			
CITY-ST-ZIP				5.4 CITY	ST-ZIP	Lithia, FL 33547			
TITLE			DELETE	6.1 TITLE			☐ Change ☐ Add	lition	
NAME				6.2 NAME					
STREET ADDRESS				6.3 STRE	T ADDRESS	;			
CITY-ST-ZIP				6.4 CITY					
14. I do hereby	certify that the information supplied	with this filing o	loes not quali	fy for the ex	emption	stated in Section 119.07(3)(i), Florida Statu	es. I further certify that the	1	

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.