

FILE NOW: FILING FEE IS \$61.25

FILED
Apr 30 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northing Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **709295** (0)
1. Corporation Name
FIRST BAPTIST CHURCH OF TEMPLE HEIGHTS, INC.



Principal Place of Business 6406-46TH STREET TAMPA FL 33617	Mailing Address 6406-46TH STREET TAMPA FL 33617
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3. Date Incorporated or Qualified 07/12/1965	Applied For <input type="checkbox"/>
4. FEI Number 59-1274196	Not Applicable <input type="checkbox"/>

2. Principal Place of Business 21 Suite, Apt #, etc.	2a. Mailing Address 26 Suite, Apt #, etc.
22 City & State	27 City & State
24 Zip	25 Country
28 Zip	30 Country

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**PERRY, ANTHONY G
3635 WOODHILL DR
BRANDON FL 33511**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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: *Anthony G Perry* DATE: **4-2-98**
Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		DELETED
TITLE	PD	<input checked="" type="checkbox"/>
NAME	PERRY, ANTHONY G	
STREET ADDRESS	3635 WOODHILL DR	
CITY-ST-ZIP	BRANDON FL	
TITLE	S	<input type="checkbox"/>
NAME	KELLEY, N A	
STREET ADDRESS	1428 HOUNDS HOLLOW CT.	
CITY-ST-ZIP	LUTZ FL 33549	
TITLE	TD	<input type="checkbox"/>
NAME	BAILIE, CLAYTON A	
STREET ADDRESS	27107 SEA BREEZE WAY	
CITY-ST-ZIP	WESLEY CHAPEL FL	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
1.1 TITLE	President/D	<input type="checkbox"/>	<input checked="" type="checkbox"/>
1.2 NAME	Wigton, James H		
1.3 STREET ADDRESS	15103 Nighthawk Dr		
1.4 CITY-ST-ZIP	Tampa, FL 33625		
2.1 TITLE	Vice-President/D	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.2 NAME	McNeal, Gary		
2.3 STREET ADDRESS	4613 E Serena Dr		
2.4 CITY-ST-ZIP	Tampa, FL 33617		
3.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
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.

SIGNATURE: *Anthony G Perry* DATE: **4-7-98 (813) 985-9889**

CFR2E037 (10/97)