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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 710473

1. Corporation Name

FIRST BAPTIST CHURCH OF LARGO, FLORIDA, INC.

Principal Place of Business

801 SEMINOLE BLVD
LARGO FL 33770
US

Mailing Address

801 SEMINOLE BLVD
LARGO FL 33770
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

03/07/1966

4. FEI Number

59-0774181

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

BULTER, KELLY
1479 HUNT LN
CLEARWATER FL 33764

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS ☐ DELETE

TITLE VD
NAME BUTLER, KELLY
STREET ADDRESS 1479 HUNT LN
CITY-ST-ZIP CLEARWATER FL 33764

TITLE PD
NAME BURRLEE, VIC
STREET ADDRESS 13128 CIMARRON CIR N
CITY-ST-ZIP LARGO FL 33774

TITLE T
NAME BOX, ED
STREET ADDRESS 10265 ULMERTON RD., #234
CITY-ST-ZIP LARGO FL

TITLE D
NAME SEXSMITH, DAVID
STREET ADDRESS 1734 CRAWFORD AV
CITY-ST-ZIP CLEARWATER FL 33756

TITLE TD
NAME BARLOW, JANICE
STREET ADDRESS 137 WOODCREEK DR
CITY-ST-ZIP SAFETY HARBOR FL 34695

TITLE TD
NAME BOX, ED
STREET ADDRESS 10265 ULMARTHAN RD
CITY-ST-ZIP LARGO FL 33771

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME **BURRELL, VIC**
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☒ Change ☐ Addition
6.2 NAME **10265 ULMERTON RD**
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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/22/99