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NONPROFIT CORPORATION ANNUAL REPORT
1999

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

DOCUMENT # 712272

1. Corporation Name
MARANATHA BAPTIST CHURCH, INC.

Principal Place of Business	Mailing Address
2532 WEST THARPE TALLAHASSEE FL 32303	2532 WEST THARPE TALLAHASSEE FL 32303

2. Principal Place of Business (21)
Suite, Apt. #, etc. (22)
City & State (23)
Zip (24) Country (25)

2a. Mailing Address (26)
Suite, Apt. #, etc. (27)
City & State (28)
Zip (29) Country (30)

3. Date Incorporated or Qualifed
02/17/1967

4. FEI Number
59-1591988
☐ Applied For
☐ Not Applicable

5. Certifcate 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

REYES, SERGIO J.
317 STARMOUNT DRIVE
TALLAHASSEE FL 32303

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☒ DELETE	1.1 TITLE	S	☒ Change ☐ Addition
NAME	ROBERTS, JOHN		1.2 NAME	GENE TIMMONS	
STREET ADDRESS	RT 4 BOX 464 - XXX		1.3 STREET ADDRESS	3670 FLAT RD	
CITY-ST-ZIP	TALLAHASSEE FL		1.4 CITY-ST-ZIP	TALLAHASSEE, FL. 32303	
TITLE	D	☒ DELETE	2.1 TITLE	T	☒ Change ☐ Addition
NAME	MCPHERSON, NEAL		2.2 NAME	BRETT H. TIMMONS	
STREET ADDRESS	2012 TOBACCO ROAD		2.3 STREET ADDRESS	1722 INDIAN TOWN LN.	
CITY-ST-ZIP	HAVANA FL		2.4 CITY-ST-ZIP	TALLAHASSEE, FL. 32312	
TITLE	DVC	☐ DELETE	3.1 TITLE	D	☒ Change ☐ Addition
NAME	HANEY, LEONARD		3.2 NAME	CHARLES WILLIAMS	
STREET ADDRESS	RT. 3, BOX 430-H		3.3 STREET ADDRESS	423 SCOTT CIR.	
CITY-ST-ZIP	TALLAHASSEE FL		3.4. CITY-ST-ZIP	HAVANA, FL. 32333	
TITLE	PD	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	REYES, SERGIO		4. 2 NAME		
STREET ADDRESS	317 STARMOUNT DRIVE		4.3 STREET ADDRESS		
CITY-ST-ZIP	TALLAHASSEE FL		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. 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: Leonard Haney SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037- (11/98)