

APPROVED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 714183 1. Corporation Name FIRST BAPTIST CHURCH OF KEY LARGO, INC.			
Principal Place of Business 99001 OVERSEAS HIGHWAY KEY LARGO FL 33037		Mailing Address 99001 OVERSEAS HIGHWAY KEY LARGO FL 33037	



2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	03/04/1968
22 City & State	27 City & State	4. FEI Number
23 Zip	28 Zip	59-1088214
24 Country	29 Country	Applied For
	30	Not Applicable
		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

B. Name and Address of Current Registered Agent Jack Hill 164 Corrine Place Key Largo, FL 33037				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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DD	1.1 TITLE	DD
NAME	HARLEE, JOHN W., JR.	1.2 NAME	Robert Fitzpatrick
STREET ADDRESS	10980 COUNTY ROAD 905	1.3 STREET ADDRESS	164 Mohawk St.
CITY-ST-ZIP	KEY LARGO FL 33037	1.4 CITY-ST-ZIP	Tavernier, FL 33070
TITLE	CDD	2.1 TITLE	DD
NAME	HILL, JACK	2.2 NAME	Paul Brishke
STREET ADDRESS	172 CORRINE PL	2.3 STREET ADDRESS	445 Lime Drive
CITY-ST-ZIP	KEY LARGO FL 33037	2.4 CITY-ST-ZIP	Key Largo, FL 33037
TITLE	VCDD	3.1 TITLE	
NAME	WEAVER, WILLIAM	3.2 NAME	
STREET ADDRESS	131 MOHAWK ST	3.3 STREET ADDRESS	
CITY-ST-ZIP	TAVERNIER FL 33070	3.4 CITY-ST-ZIP	
TITLE	DD	4.1 TITLE	
NAME	POWELL, JOE Q	4.2 NAME	
STREET ADDRESS	1026 DOVE RD	4.3 STREET ADDRESS	
CITY-ST-ZIP	KEY LARGO FL 33037	4.4 CITY-ST-ZIP	
TITLE	SDD	5.1 TITLE	
NAME	GREWE, PAUL	5.2 NAME	
STREET ADDRESS	167 COCONUT ROW	5.3 STREET ADDRESS	
CITY-ST-ZIP	TAVERNIER FL 33070	5.4 CITY-ST-ZIP	
TITLE	ASD	6.1 TITLE	
NAME	COTTRELL, GORDON	6.2 NAME	
STREET ADDRESS	7 CORRINE PL	6.3 STREET ADDRESS	
CITY-ST-ZIP	KEY LARGO FL 33037	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 REQUIRED *Jack Hill* 11, 1999 (305) 451-3782
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 JACK HILL

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