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

NONPROFIT CORPORATION ANNUAL REPORT

KISH, ERNEST J

1173 SCYPHER ST NE

BETHESDA BAPTIST CHURCH, INC.

9. Name and Address of Current Registered Agent

## FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # 714413 (2)

## **FILED** Jan 27 1998 8:00am Secretary of State

10. Name and Address of New Registered Agent

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

- 1 (68/16 BURN) 1100 BERGE OTRAL LIVED BERGENDIN ALDIE DIRECTORIO ORDER DIVER SADE

| Principal Place of Business              | Mailing Address                           |   |                                   |  |  |
|--|---|---|-----------------------------------|--|--|
| 810 FORDHAM ROAD NE<br>PALM BAY FL 32905 | 2810 FORDHAM ROAD NE<br>PALM BAY FL 32905 | 3. Date Incorporated or Qualified 04/09/1968                                      |                                   |  |  |
|  |   | 4. FEI Number   | Applied For                       |  |  |
|  |   | 71-4413151  | Not Applicable                    |  |  |
| Principal Place of Business  AME AS AB   | OVE 26 SAME AS AE                         | 30 VE 5. Certificate of Status Desired  | \$8.75 Additional<br>Fee Required |  |  |
| Suite, Apt. #, etc.                      | Suite, Apt. #, etc.                       | 6. Election Campaign Financing Trust Fund Contribution                            | \$5.00 May Be<br>Added to Fees    |  |  |
| SAME AS ABOV                             | City & State                              | 7- Is this nonprofit corporation a homeown  | X No                              |  |  |
| Zip Country<br>4 1 25 US #               | Zip Count. 29 30                          | 7y 8. This corporation owes or has paid the of Personal Property Tax due June 30. | current year Intangible  Yes XNo  |  |  |

PALM BAY FL 32905 City

Name

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 at |          | egistered Agent signature requ |  | DATE                    | -w w <del>  3  </del> |
| 12.            | OFFICERS AND D  |          | 13.                            | ADDITIONS/CHANGES I  | O OFFICERS AND DIRECTOR |                       |
| TITLE          | DC  | ☐ DELETE | 1.1 TITLE                      |  | ☐ Change                | Addition              |
| NAME           | Kish, ernest j  |          | 1.2 NAME                       |  |                         |                       |
| STREET ADDRESS | 1173 SCYPHER ST NE                                      | OK       | 1.3 STREET ADDRESS             |  |                         |                       |
| CITY-ST-ZIP    | PALM BAY FL   |          | 1.4 CITY-ST-ZIP                |  |                         |                       |
| TITLE          | TD  | DELETE   | 2.1 TITLE                      |  | Change                  | Addition              |
| NAME           | Kish, ethel P.  | i        | 2.2 NAME                       |  |                         |                       |
| STREET ADDRESS | 1173 SCYPHER ST. N.E.                                   | οK       | 2.3 STREET ADDRESS             |  |                         |                       |
| CITY-ST-ZIP    | PALM BAY FL   |          | 2. 4 CITY - ST - ZIP           |  |                         |                       |
| TMLE           | SD  | ☐ DELETE | 3.1 TITLE                      | the state of the s | Change                  | Addition              |
| NAME           | YANIK, JEAN   | oK       | 3.2 NAME                       |  |                         |                       |
| STREET ADDRESS | 2850 KOSSUTH RD NE                                      | 0.0      | 3.3 STREET ADDRESS             |  |                         |                       |
| CITY-ST-ZIP    | PALM BAY FL 32905                                       |          | 3.4. CITY-ST-ZIP               |  |                         |                       |
| TITLE          |   | DELETE   | 4,1 TITLE                      |  | Change                  | Addition              |
| NAME           |   |          | 4. 2 NAME                      |  |                         |                       |
| STREET ADDRESS |   |          | 4.3 STREET ADDRESS             |  |                         |                       |
| CITY-ST-ZIP    | <u> </u>  |          | 4.4 CITY-ST-ZIP                |  |                         |                       |
| TITLE          | 411   | 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 |   | İ        | 6.3 STREET ADDRESS             |  |                         |                       |
| CIDA OT TID    |   |          | 6.4.CITY OT 210                |  |                         |                       |

I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f), 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 speelver 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 appartachment with an additional statutes.

SIGNATURE:

407-723-7727