

FILE NOW: FILING FEE IS \$61.25

FILED
May 13 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 718798 (2)
1. Corporation Name
**MOUNT PILGRIM PRIMITIVE BAPTIST CHURCH, INC., OF
BRADENTON, FLORIDA**

Principal Place of Business 126 9TH AVE WEST BRADENTON FL 34205-0831	Mailing Address 126 9TH AVE WEST BRADENTON FL 34205-0831
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3. Date Incorporated or Qualified 07/08/1970	
4. FEI Number 05-0022202	Applied For ☐ Not Applicable

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
**WILLIAMS, ROBERT
1502 17TH ST EAST
BRADENTON FL 34206**

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 *Robert Lee Williams*
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4-26-98

12. OFFICERS AND DIRECTORS	
TITLE	SD ☐ DELETE
NAME	RAWLS, CHARLES
STREET ADDRESS	1106 6TH ST W
CITY-ST-ZIP	BRADENTON FL
TITLE	TD ☐ DELETE
NAME	FARNUM, GENEVA E
STREET ADDRESS	2829 LEON AVE
CITY-ST-ZIP	SARASOTA FL
TITLE	VD ☐ DELETE
NAME	SIMPKINS, LEROY
STREET ADDRESS	1212 8TH ST E
CITY-ST-ZIP	BRADENTON FL
TITLE	D ☐ DELETE
NAME	ALLEN, CEASER
STREET ADDRESS	520 12TH ST DRIVE
CITY-ST-ZIP	PALMETTO FL
TITLE	PD ☐ DELETE
NAME	WILLIAMS, ROBERT
STREET ADDRESS	1502 17TH ST EAST
CITY-ST-ZIP	BRADENTON FL
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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	
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	
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: *Robert Lee Williams*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-98

Date

Daytime Phone # **0063763**

CP2E037 (10/97)