FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Mar 02, 1999 8:00 am § Secretary of State

03-02-1999 90177 003 ****61.25

DOCUMENT #	720264

1. Corporation Name

FOURTEENTH AVENUE CHURCH OF CHRIST, INC.

Principal Place of Business 3737 - 14TH AVE. NORTH ST PETERSBURG FL 33713 Mailing Address

3737 - 14TH AVE. NORTH ST PETERSBURG FL 33713

US				100151 10010 11015 8011E \$1010 01\$1 6\$E\$ E\$011 01011 04811 01011 01011 01011					
							 -		
 '	ipal Place of Business 2a. Mailing Address			- "	3. Date Incorporated or Qualifed 02/16/1971	i		_	
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.				4. FEI Number			App	lied For	
— — — — — — — — — — — — — — — — — — —					59-0879137		Not	Applicable	
22			*	\$8.75 Addition			dditional		
23 28				5. Certifcate of Status Desired				uired	
Zip	Country	Zip	Country		6. Election Campaign Financing	<u> </u>	\$5.00 N	/lay Be	
24	25	29	30		Trust Fund Contribution		Added to Fees		
	9. Name and Address of Curren	t Registered Agent		,	10. Name and Address of New	Registered	Agent		
			81	Name				:	
MOSLEY, H. LANO				Street Add	ddress (P.O. Box Number is Not Acceptable)				
	A CIEGA POINT BLVD.		83	 					
ST. PETE	RSBURG FL 33707				<u> </u>				
1			84	City		FI	85 Zip Ci	ode	
11. Pursuant	to the provisions of Sections 617.050	2 and 617,1508, Florida Statute	s, the abov	e-named con	poration submits this statement for th	e purpose o	f changing its r	egistered	
office or	registered agent, or both, in the State arm familiar with, and accept the obligations.	of Florida, Such change was au	itnorizea ov	the corporati	ion's board of directors. I hereby acc	ept the appo	intment as reg	istered	
SIGNATURE	Signature, typed or printed name of registered age	nt and title if andicable (NOTE:	Registered Age	nt signature require	ed when reinstating)	DATE			
12.		ID DIRECTORS	13.	,	ADDITIONS/CHANGES TO O	FFICERS A	ND DIRECTOR	RS IN 12	
TITLE	PD	☐ DELETE	1,1 TITLE				☐ Change	☐ Addition	
NAME	BASTIEN, RONALD M.		1.2 NAME						
STREET ADDRESS			1.3 STREE	T ADDRESS					
CITY-ST-ZIP	ST. PETERSBURG FL		1.4 CITY-S	iT-ZIP					
TITLE	VPT	☐ DELETE	2.1 TITLE		4		Change	☐ Addition	
NAME :	MOSLEY, H. LANO		2.2 NAME		1		~ · & .		
STREET ADDRESS			2.3 STREE	T ADDRESS					
CITY-ST-ZIP	ST. PETERSBURG FL	<u></u>	2. 4 CITY-	ST-ZIP					
TITLE	D	☐ DELETE	3.1 TITLE				Change	Addition	
NAME	MARLOW, HARRY SR.		3.2 NAME					1	
STREET ADDRESS	1		3.3 STREE	TADDRESS				1	
CITY-ST-ZIP	PINELLAS PARK FL		3.4. CITY-	ST-ZIP					
TITLE	D	☐ DELETE	4.1 TITLE				Change	☐ Addition	
NAME	ALLEN, HOWARD K.		4. 2 NAME						
STREET ADDRESS	4525 - 4TH AVE. N.		4.3 STREE	T ADDRESS					
CITY-ST-ZIP	ST. PETERSBURG FL		4.4 CITY-5	ST-ZIP					
TITLE	Φ	☐ DELETE	5.1 TITLE				Change	☐ Addition	
NAME	BASTIEN, ROBERT M 3451-1412 AUE NO STRIFERSDURG, 71 3).	5.2 NAME	1			•	ł	
STREET ADDRESS	2451-14 TH AUE NO		1	T ADDRESS					
CITY-ST-ZIP	St Refersburg, 71 3	37/ 3	5.4 CITY-5	ST-ZIP					
TITLE		☐ DELETE	6.1 TITLE				☐ Change	☐ Addition	
NAME			6.2 NAME					j	
STREET ADDRESS	s)			T ADDRESS					
CITY-ST-ZIP			6.4 CITY-5	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:

VICESTUMS SOURES

48/99 (727)393-9141

:R2E037 (11/98)