FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

Principal Place of Business

(2)

Mailing Address

NORTHSIDE BAPTIST CHURCH, INC.

FILED Feb 03 1998 8:00am Secretary of State

_				
	3. Date Incorporated or Qualified			
	01/24/1974			
	4. FEI Number	Applied For		
	59-1495080	Not Applicable		

1700 N FRANKLIN S1. PLANT CITY FL 33566 PLANT CITY FL 33566 US US			3. Date Incorporated or Qualified				
			01/24/1974				
00	00		4. FEI Number	Applied For			
			59-1495080	Not Applicable			
Principal Place of Business 2a. Mailing Address 25			5. Certificate of Status Desired	Certificate of Status Desired S8.75 Additional Fee Required			
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. Election Campaign Financing Trust Fund Contribution	· · · · · · · · · · · · · · · · · · ·			
City & State	City & State City & State		7. Is this nonprofit corporation a homeowners association? Yes \(\sum \text{No} \)				
Zip Country 25	Zip Co 29 30						
9. Name and Address of Curr	ent Registered Agent	10. Name and Address of New Registered Agent					
		81 Name					
703 W. CHERRY ST.		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.							

agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.											
SIGNATURE											
Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12											
12.	OFFICERS AND DIREC		13.	ADDITIONS/CHANGES TO	OFFICERS AN						
TITLE	S	DELETE	1.3 TITLE			Change	Addition				
NAME	COTTEN, FRANCES		1.2 NAME								
STREET ADDRESS	1004 W CHERRY ST		1,3 STREET ADDRESS								
CITY-ST-ZIP	PLANT CITY, FL 00000		1.4 CITY-ST-ZIP								
ππle	T	☐ DELETE	2.1 TITLE			☐ Change	☐ Addition				
NAME	SMITH, W.A.		2.2 NAME		_						
STREET ADDRESS	2702 W. SR 60		2.3 STREET ADDRESS		Þ						
CITY-ST-ZIP	PLANT CITY FL		2. 4 CITY-ST-ZIP								
TITLE	VD	DELETE	3.1 TITLE			☐ Change	Addition				
NAME	WIGGINS, MICHAEL A		3.2 NAME								
STREET ADDRESS	606 N PALM DR		3.3 STREET ADDRESS								
CITY-ST-ZIP	PLANT CITY, FL 00000		3.4, CITY-ST-ZIP								
TITLE	D	DELETE	4.1 TITLE			Change	Addition				
NAME	TERRELL, LEE		4, 2 NAME								
STREET ADDRESS	308 EUNICE DR.		4.3 STREET ADDRESS								
CITY-ST-ZIP	PLANT CITY 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								
0,77, 67 715			EACITY ST 7ID				1				

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: