FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 730551

THE FIRST BAPTIST CHURCH OF WEIRSDALE, FLORIDA,

Principal Place of Business 13725 SE 164 ST BOX 606 WEIRSDALE FL 32195

Mailing Address

13725 SE 164 ST . BOX 606 WEIRSDALE FL 32195

FILED Jan 28, 1999 8:00am **Secretary of State**

01-28-1999 90038 044 ****61.25



3. Date Incorporated or Qualifed

2. Principal Place of Business		2a. Mailing Address			3. Date Incorporated or Qualifed			
1	•	26			08/28/1974			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			4. FEI Number			ied For
2		27			59-1575841			Applicable
City & State	9	City & State			5. Certifcate of Status Desired		\$8.75 Ac Fee Req	
Zip	Country	Zip	Country		6. Election Campaign Financing		\$5.00 N	lav Be
¬ ''	25 29		30		Trust Fund Contribution		of bebbA	
4	9. Name and Address of Current		1		10. Name and Address of New	Registered A	gent	
	o. Italia dia radioso di salitati		81	Name				
BANGEN 1		•	82	6	(D.O. Day Number in Not Accord	abla)	 	
BAXLEY, WILLIAM L				Street Addre	ess (P.O. Box Number is Not Accept	able)		
16545 SE 130TH AVE								
WEIRSDALE FL 32195			83		3-9-5			
	•		84	City	0.	FI	85 Zip Co	ode
	to the provisions of Sections 617.0502		45 - 5		estion submits this statement for the	numose of c	hanging its s	egistered
- office or r	to the provisions of Sections 617.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	Honda, Such change was aut	nonzea ov	trie corporatio	on's board of directors. I hereby acce	pt the appoin	tment as reg	stered
SIGNATURE	Signature, typed or printed name of registered agent a	and title if analicable (NOTE: R	tegistered Agen	t signature required	d when reinstating)	DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OF	FICERS AN	DIRECTOR	S IN 12
TITLE	DC	DELETE	1.1 TITLE				Change	☐ Addition
	BAXLEY, WILLIAM L		1.2 NAME					
NAME	16545 SE 130TH AVE		1.3 STREET	T ADDRESS	•			
STREET ADDRESS			1.4 CITY-ST					
CITY-ST-ZIP	WEIRSDALE FL 32195	□ DELETE	2.1 TITLE		*		Change	Addition
TITLE	D		2.2 NAME					
NAME	BIELLING, J.D.		1		•			
STREET ADDRESS		•	2.3 STREET					
CITY-ST-ZIP	7121100712276 02100		2. 4 CITY-S	ST-ZIP			Change	Addition
TITLE	DT	☐ DELETE 3.1 T					Change	
NAMÉ : : : '	SEIFERT, PAUL H		3.2 NAME				•	
STREET ADDRESS	12501 SE HWY 42, BOX 1095	· ·	3.3 STREET	TADDRESS				'
CITY-ST-ZIP	WEIRSDALE FL 32195		3.4. CITY-S	ST-ZIP				M Addition
TITLE	S	☐ DELETE	4.1 TITLE				Change	Addition
NAME ,	BRADLEY, MARY LEE		4. 2 NAME		,			
STREET ADDRESS		•	4.3 STREET	TADDRESS				" i.e
CITY-ST-ZIP	WEIRSDALE FL 32195		4.4 CITY-S	T-ZIP		: '	1	•
TITLE		☐ DELETE	5.1 TITLE				Change	☐ Addition
NAME			5.2 NAME				•	
STREET ADDRESS	\$ ·		5.3 STREE	T ADDRESS	•			
	1 4.3 · · ·		5.4 CITY-S	T-ZIP				
CITY-ST-ZIP TITLE	A. 3.4.	☐ DELETE	6.1 TITLE	 -			Change	☐ Addition
			6.2 NAME	-]	•			
NAME				TADDRESS	•			
STREET ADDRESS	1	\	6.4 CITY-S					
CODY OF TID	1.7		■ U.7 U(((1 ° 0	, , - 4-HT				

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.

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