FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

731464

(4)

RIVERVIEW HEIGHTS MISSIONARY BAPTIST CHURCH, INC.

·										
Principal Plac	e of Business	Mailing Address)	4 elek e ilik 418	A) WIGH W	1816 81811 1881	
1301 E. MAIN ST. P. O. BOX 581 WAUCHULA FL 33873		HIGHWAY 64 A EAST P. O. BOX 581 WAUCHULA FL 33873				3. Date Incorporated or Qualified 12/26/1974				
บร						4. FEI Number 59-1794514			oplied For of Applicable	
2. Principal P	lace of Business	2a. Mailing Address					□ \$ ¹		Additional	
21		26				5. Certificate of Status Desired	<u> </u>		equired	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				6. Election Campaign Financing			Мау Ве	
22 City & Stat		City & State	City & Stete			Tradit and Contribution		dded to		
23		— ·	28			7. Is this nonprofit corporation a hom	Yes No		nr	
Zip Country		Zip	Zip Country			8. This corporation owes or has paid	the current	year Ini	angible	
24	25	29	30			Personal Property Tax due June 3			No.	
	9. Name and Address of Cu	irrent Registered Agent	81	Name		10. Name and Address of New Regi	stered Ager	<u>it</u>		
BDADO	OOK WHOMAS OF				,					
BRADDOCK (THOMAS C.) HIGHWAY 64			82	82 Street Address (P.O. Box Number is Not Acceptable)						
	IULA FL 33873		83	1						
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			B4	City				-1	Code	
			1				FL 65	`		
11. Pursuant	to the provisions of Sections 617	.0502 and 617.1508, Florida State	ites, the above	e-name	d corpo	ration submits this statement for the purn's board of directors. I hereby accept	rpose of char	nging it	s registered	
agent. I a	irn familiar with, and accept the o	obligations of, Section 617.0503, F	lorida Statute	is.	porano	To bound of embolosis. Thoroby decopi	are appoint	10111 (45	rogiololou	
SIGNATURE .	Signature, typed or printed name of registere	of priorit and title if confeathle	TE: Registered Ag	and since!	ro see dead	Lubon visatalina)	DATE			
12,		AND DIRECTORS	13.	en sunan	re legoneo	ADDITIONS/CHANGES TO OFFICE		ECTOF	IS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE	1.1 TITLE				Change	Addition	
NAME	BRADDOCK THOMAS C		1.2 NAME	1.2 NAME						
STREET ADDRESS	HWY 64 WEST		1.3 STREE	T ADDRESS	.					
CITY-ST-ZIP	WAUCHULA FL			1.4 CITY-ST-ZIP						
TITLE	SD SPAROON MAKES A	DELETÉ	2.1 TITLE	· ·			<u></u> П	Change	Addition	
NAME DEPART ADDRESS	BRADDOCK, JAMES A		2.2 NAME							
STREET ADDRESS	ss 312 PARK DRIVE WAUCHULA FL			2.3 STREET ADDRESS 2.4 CITY-ST-ZIP						
CITY-ST-ZIP TITLE	TD	☐ DELETE	3.1 TITLE	31-41	 			Change	Addition	
NAME	SUTTON, PAUL D.			3.2 NAME						
STREET ADDRESS	314 PARK DRIVE		3.3 STREE	3.3 STREET ADDRESS						
CITY-ST-ZIP	WAUCHULA FL		3.4. CITY -	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		DELETE		4.4 CITY - ST - ZIP				Change	Addition	
TITLE NAME			5.1 HIEE 5.2 NAME	5.1 TITLE				Change	F** Vanion	
STREET ADDRESS				t address						
CITY-ST-ZIP			5.4 CITY-							
TITLE	l 	☐ DELETE	6.1 TITLE		1			Change	Addition	
NAME			6.2 NAME		1					
STREET ADDRESS			6.3 STREE	T ADORESS	1					
O(T) CT 7/D			0.4.0179	0 T TID	1					

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:

ames A Druddick

James A. Braddick 5/17/98

941-773-3344

FILED

May 21 1998 8:00am

Secretary of State

RE037 (10/97)