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**

POCU I. Corporalle	MENT # 73202	5 (2)		
BEREA BAPTIST CHURCH OF PLANT CITY, FLA., INC.				
Principal Place of Business Mailing Address			-,	
BEREA BAPTIST CHURCH S.R. 39 SOUTH BEREA BAPTIST CHURCH S.R. 39 SOUTH JMM REDMAN PARKWAY PLANT CITY FL 33567 BEREA BAPTIST CHURCH S.R. 39 SOUTH JMM REDMAN P. 4305 SOUTH JMM REDMAN P. PLANT CITY FL 33567			S.R. 39 SOUTH	3. Date Incorporated or Qualified
			PARKWAY	02/28/1975
				4. FEI Number Applied For 59-1796279 Not Applicable
2. Principal I	Place of Business	2a. Mailing Address		50.75 avenue
21		26		5. Certificate of Status Desired
Suite, Apt	. #, etc.	Suite, Apt. #, etc.		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
City & Sta	te	City & State		Trust Fund Contribution LJ Added to Fees 7. Is this nonprofit corporation a homeowners association?
23		28		☐ Yes 🔣 No
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year intangible
24	9. Name and Address of Curre	nt Registered Agent	30	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
····	e. Isalie and Addison of Ourie	in megistered Agent	81 Name	
LIAMANIC OFF				
1308 W JOHNSON ROAD			82 Stree	t Address (P.O. Box Number is Not Acceptable)
PLANT CITY FL 33567			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	Park E. F	tree une		11. 2.9~ 9 K
	Signature, typed or printed name of registered ag			re required when reinstating) DATE
12.	T 22	DIRECTORS DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TR Change MAddition
NAME	TR LOCKHART, H L	peerie	1.2 NAME	CAMERON, CLAUDE
STREET ADDRESS	709 E SPARKMAN ROAD		1.3 STREET ADDRESS	1.100
CITY-ST-ZIP	PLANT CITY FL		1.4 City-ST-ZIP	PLANT CITY FL 33567
TITLE	1	DELETE	2.1 TITLE	TR Change Addition
NAME	HAWKINS, GENE		2.2 NAME	DEAN, STEVEN
STREET ADDRESS	1308 W JOHNSON RD		2.3 STREET ADDRESS	1, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5,
CITY-ST-ZIP	PLANT CITY FL		2. 4 CITY-ST-ZIP	PLANT CITY FL 33567
TITLE	ST	DELETE	3.1 TITLE	TR Change Addition
NAME	PARRISH, TITUS		3.2 NAME	LIGHTSEY, RUSSELL
STREET ADDRESS	3018 S NORTHVIEW RD.		3.3 STREET ADDRESS	
CITY-ST-ZIP	PLANT CITY FL	DELETE	3.4. CITY-ST-ZIP	PLANT CITY FL 33567
TITLE	TR Greene, ray	- Derest	4.1 TITLE	☐ Change ☐ Addition
NAME CONCET ADDRESS	1706 SPARKMAN RO		4.2 NAME 4.3 STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP	PLANT CITY FL		4.4 CITY-ST-ZIP	'
TITLE	TR	≥ DELETE	5.1 TITLE	Change Addition
NAME	BEACH, REX	— - ·· -	5.2 NAME	
STREET ADDRESS	5010 BEACH FARM ROAD		5.3 STREET ADDRESS	, [
CITY-ST-ZIP	PLANT CITY FL		5.4 CITY-ST-ZIP	
TITLE	Ť	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	LEWIS, HAROLD		6.2 NAME	
STREET ADDRESS	704 W STATE RD 60		8.3 STREET ADDRESS	

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:

FILED

May 01 1998 8:00am

Secretary of State