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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name 732424

(7)

SAMOSET OPEN BIBLE TABERNACLE, INC.

| Principal Place of Business Mailing Address | | | | | | | | | | |
|---|--|--|------------------------------------|-----------|--------------------------|--|---|----------------------------|----------------------------|--|
| 1612 32ND AVI BRADENTON F | | 1612 32ND AVE E BRADENTON FL 34208-4256 | | | | | | | | |
| | | | | | | 3. Date Incorporated or Qualified 04/11/1975 | 3a. Da | ate of Last R 02/01/19 | eport 196 | |
| 2. Principal Pi | lace of Business | 2a. Mailing Address 26 | | | 4. FEI Number 59-1780265 | Applied For Not Applicable | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, et | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | | \$8.75 / Fee Re | | |
| City & State | | City & State | | | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees | | | |
| Zip | Country | Zip | — · | | | B. This corporation has liability for | intangible | tax under s. | | |
| 24 | 25 29 9. Name and Address of Current Registe | | 30] | | | | Florida Statutes Yes No 10. Name and Address of New Registered Agent | | | |
| | 9. Name and Address of Current | t Hagistered Agent | | 81 | Name | 10. Name and Address of New N | gistered | Agent | , | |
| VIDDV I | DICUADO E | | L | | | | | | | |
| | RICHARD E PND AVE EAST | | 82 Street Add | | | ddress (P.O. Box Number is Not Accepta | ble) | | | |
| SAMOS | | | | 83 | | | | | | |
| 34208 | | | | 84 | City | | FL | 85 Zip (| Code | |
| office or re | to the provisions of Sections 617.050; egistered agent, or both, in the State m familiar with, and accept the obliga | of Florida. Such change | was authorized | i by t | named c | orporation submits this statement for the ration's board of directors. I hereby acce | ourpose o | changing it cintment as | s registered registered | |
| SIGNATURE _ | Signature typed or printed name of registered age | | More B | | | Quired when reinstating) | | | | |
| 12. | OFFICERS AND | | (NC/TE: Hegistereo | Ageni | i signatura re | ADDITIONS/CHANGES TO OFFI | DATE CERS AND | DIRECTOR | S IN 12 | |
| TITLE | D | DELE | 1.41 | LE | · | 7,00110010,01111000110 | 02,107,11 | Change | Addition | |
| NAMÉ | SLAUGHTER, MR SIDNEY | _ | 1.2 NA | | | | | _ • | _ | |
| STREE1 ADDRESS | 3704 51ST STREET E | | | | DDRESS | | | | | |
| CITY-ST-ZIP | BRADENTON, FL 00000 | | 1.4 CIT | Y-\$1- | - ZIP | | | | | |
| TITLE | D | DELE | | | | | | Change | Addition | |
| NAME | SLAUGHTER, MR GARY | | 2.2 NA | ME | | | | | | |
| STREET ADDRESS | 6325 18TH AVE. E. | | 2.3 \$1 | REET A | DDRESS | | | | | |
| CITY-ST-ZIP | BRADENTON, FL 00000 | | 2. 4 CITY-ST-ZIP | | T•ZIP | | | | | |
| TITLE | D DELETE | | TE 3.1 TIT | 3.1 TITLE | | | | Change | Addition | |
| NAME | Muncie, Mr ted | | 3.2 NA | ME | Ì | | | | | |
| STREET ADDRESS | 1810-67TH ST.CT.,EAST | | 3.3 ST | REET A | NDDAESS . | | | | | |
| CITY-ST-ZIP | BRADENTON, FL 00000 | | 3.4. CI | TY-ST | - ZIP | | | | | |
| TITLE | Р | DELET | ſĒ 4.1 ΤΙΤ | LE | | | | Change | Addition | |
| NAME | KIRBY, REV RICHARD E | | 4.2 N/ | | | | | | | |
| STREET ADDRESS | 1612 32ND AVE EAST | | | | NODRESS | | | | | |
| City-St-ZiP | SAMOSET, FL 00000 | T l neuer | 4.4 CIT | <u> </u> | - ZIP | | | Channe | Address | |
| TITLE | D DANAD I | ☐ DELE | | | | | | L. Change | Addition | |
| NAME | BOONE, DAVID L. | | 5.2 NA | | | | | | | |
| STREET ADDRESS | 4520 51ST ST. E. | | | | ADDRESS | | | | | |
| CITY-ST-ZIP | BRADENTON FL | DELE | 5.4 CIT | | - ZIP | | | Change | Addition | |
| TITLE | D CLAUGHTED EDANCIC | L' DELLE | | | | | | CT CUBING | ווטוווטטא ב | |
| NAME CIRCLY ADDRESS | SLAUGHTER, FRANCIS 1625 18TH AVE EAST | | 6.2 NA | | LDBBECC | | | | | |
| STREET ADDRESS | BRADENTON FL | | | | ADDRESS | | | | | |
| CITY-ST-ZIP 14. L do beret | | d with this filing does not | 6.4 CII | | | ited in Section 119.07(3)(i), Florida Statut | es. I furthe | r certify that | the | |
| informatio Lam an o | n indicated on this annual report or s | upplemental annual repo the receiver or trustee e | ort is true and a mpowered to e | ccur | rate and t | hat my signature shall have the same leg port as required by Chapter 617, Florida | al effect a | s if made un | der oath; that | |

SIGNATURE: Righard Richard R Kirby President Jan. 17, 197

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Feb 03 1997 8:00am

Secretary of State

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