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NONPROFIT CORPORATION ANNUAL REPORT



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(3)

FILED May 05 1998 8:00am Secretary of State

	BAPTIST CHURCH, INC.		· · · · · · · · · · · · · · · · · · ·			
Principal Place	e of Business	Mailing Address		d to fact canno colle sette control in		141 BIQII 144BI
702 E. NEW HAVEN AVE.		702 E. NEW HAVEN AVE.		3. Date Incorporated or Qualific	ed	
P.O. BOX 366 MELBOURNE FL	22001	P.O. BOX 366 MELBOURNE FL 32901		05/19/1975		_
MELDOUNNE FL	. 32901	MELDOUNING PL 32301		4. FEI Number	Ap	plied For
				59-0782447		t Applicable
2. Principal Pi	lace of Business	2a. Malling Address		5. Certificate of Status Desired	\$8.75	
Suite, Apt.	#. etc.	Suite, Apt. #, etc.		6. Election Campaign Financing	Fee Re	
22		27		Trust Fund Contribution	S SS.OU N	
City & State		City & State		7. Is this nonprofit corporation a homeowners association?		
3		26			☐ Yes 🔣 No	
Zip	Country	Zip	Country	8. This corporation owes or has	s paid the current year Int	angible
24	25	29	30	Personal Property Tax due J		No
	9. Name and Address of Curren	it Registered Agent		10. Name and Address of New	Registered Agent	
			81 Name			
JONES, (CECIL S.		82 Street	Address (P.O. Box Number is Not Accep	otable)	
	ie street				· · · · · · · · · · · · · · · · · · ·	
MELBOU	RNE BEACH FL 32951		83			
			84 City		- 85 Zip (Code
11. Pursuant to	to the provisions of Sections 617.050 egistered agent, or both, in the State	l2 and 617.1508, Florida Statu ⊢of Florida, Such change was	tes, the above-named authorized by the corr	corporation submits this statement for the poration's board of directors. I hereby ac	ne purpose of changing its ecept the appointment as	s registered registered
agent. I a	m familiar with, and accept the oblig	ations of, Section 617.0503, F	lorida Statutes.	solution a board of all colors. Thereby ac	soopt are appearation as	. og.o.o.o.
SIGNATURE _						
	Signature, typed or printed name of registered age		TE: Registered Agent algnature		DATE EICERS AND DIRECTOR	S IN 12
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTOR	
12. TITLE	OFFICERS AN		13. 1.1 TITLE	ADDITIONS/CHANGES TO OF		
12. TITLE NAME	D COX, CHARLES	D DIRECTORS	13. 1.1 TITLE 1.2 NAME	ADDITIONS/CHANGES TO OF D STEVE WHERRY	FICERS AND DIRECTOR	
12. TITLE NAME STREET ADDRESS	D COX, CHARLES 1534 CYPRESS TRACE DR	D DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ADDITIONS/CHANGES TO OF D STEVE WHERRY 1217 ELCON DRIVE	FICERS AND DIRECTOR Change	
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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 an analysis and with an address.