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May 13 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 733866 (8)

1. Corporation Name

PROVIDENCE PROGRESSIVE BAPTIST CHURCH OF BARTOW,
FLORIDA INC..

Principal Place of Business

Mailing Address

PROVIDENCE PROGRESSIVE M B C
510 BOTTLE AVENUE
BARTOW FL 33830
US

PROVIDENCE PROGRESSIVE M B C
510 BOTTLE AVENUE
BARTOW FL 33830-3613
US



3. Date Incorporated or Qualified
09/19/1975

3a. Date of Last Report
04/15/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

05-0043644

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DAVIS, FRED T., JR.
RT. 1, BOX 138, SOUTH AVENUE
BARTOW FL 33830

81 Name

H Louis A. Burgess

82 Street Address (P.O. Box Number is Not Acceptable)

1226 Longwood Oaks Blvd.

83

84 City

Lakeland

FL

85 Zip Code

33811

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 Louis A. Burgess

(NOTE: Registered Agent signature required when reinstating)

1/14/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE V ☐ DELETE
NAME BURGESS, CARL J.
STREET ADDRESS 830 POLK ST.
CITY-ST-ZIP BARTOW, FLORIDA 0

1.1 TITLE TREASURER / Director ☒ Change ☐ Addition
1.2 NAME Carl J. Burgess
1.3 STREET ADDRESS 830 Polk Street
1.4 CITY-ST-ZIP Bartow, Florida 33830

TITLE TD ☒ DELETE
NAME FORSETT, VERNON
STREET ADDRESS 830 POLK ST.
CITY-ST-ZIP BARTOW, FLORIDA 0

2.1 TITLE VICE President / Director ☐ Change ☒ Addition
2.2 NAME Louis A. Burgess
2.3 STREET ADDRESS 1226 Longwood Oaks Blvd.
2.4 CITY-ST-ZIP Lakeland, Florida 33811

TITLE D ☐ DELETE
NAME BURGESS, HERMAN L.
STREET ADDRESS 835 POLK ST.
CITY-ST-ZIP BARTOW, FLORIDA 0

3.1 TITLE SECRETARY / Director ☒ Change ☐ Addition
3.2 NAME Herman L. Burgess
3.3 STREET ADDRESS 595 Waldon Avenue
3.4 CITY-ST-ZIP Bartow, Florida 33830

TITLE PD ☐ DELETE
NAME SIMS, OLIVE
STREET ADDRESS 1950 LAUREL STL
CITY-ST-ZIP BARTOW, FLORIDA 0

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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: *Herman L. Burgess*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/97

Date

Daytime Phone # 0053430

CR2E037 (9/96)