FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 735862 1. Corporation Name

HERITAGE BAPTIST CHURCH, INC.

Principal Place of Business

3065 HIGHWAY 297-A **CANTONMENT FL 32533** Mailing Address

3065 HIGHWAY 297-A **CANTONMENT FL 32533**

FILED Apr 13, 1999 8:00 am § Secretary of State

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2. Principal Pl	ace of Business	2a. Mailing Address				05/19/1976				
21		26							·	
≃_ Suite, Apt.:	Suite, Apt. #, etc. Suite, Apt. #,					59-1665976			nied For	
22 27						39 1003970			Applicable	
City & State City & State						5. Certificate of Status Desired		\$8.75 Ac		
23 28					· · · · · ·		·		<u></u>	
Zip				ntry		6. Election Campaign Financing \$5.00 May Be				
24 25 29 3						Trust Fund Contribution Added to Fees				
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent					
		,		81 N	ame				•	
Martin, timothy l				82 Street Address (P.O. Box Number is Not Acceptable)						
3204 SAMANTHA DR										
CANTONMENT FL 32533				83						
				84 C	ity			85 Zip C	ode	
		1		'	-		<u>FL</u>			
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										
office or n	egistered agent, or both, in the State of m familiar with, and accept the obligatio	ns of, Section 617.0503, Florid	da Statu	tes.	corporation	s board of directors. Friendsy ac	copt the appoi	nanoni ao rog	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
=		•							Į.	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Ro				Agent sig	nature required v	uired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
12.	OFFICERS AND		13.				OFFICERS AN		Addition	
TITLE	Т	DELETE	1.1 TIT	LE T	[☐ Change	Z COGINOTI	
NAME	WELCH, RON		1.2 NA	ME	Key	· Bryant	ı .			
STREET ADDRESS						64 copper Ridge C	<i>ن</i> ٠٠.			
CITY-ST-ZIP	CANTONMENT FL			1.4 CITY-ST-ZIP		stonment, FL 3	<u> 253 3 </u>			
TITLE	T	☐ DELETE	2.1 ₹11	LE	S			Change	Addition	
NAME	COLBERT, SHELDON		2.2 NA	ME	Rex	Bryant				
STREET ADDRESS	1085 URBAN DR			REET ADD	RESS 32L	ey Copper Ridge	Str			
CITY-ST-ZIP	CANTONMENT FL	INTONMENT FL			Car	stonment, FL 3	<u> 2533</u>			
TITLE	D	☐ DELETE	3.1 111	LE		• • • • • • • • • • • • • • • • • • • •		Change	Addition	
NAME	KELLEY, JOHN			3.2 NAME						
STREET ADDRESS	34995 MAGNOLIA FARMS ROAD			REET ADI	DRESS				1	
CITY-ST-ZIP	ROBERTSDALE AL			TY-ST-ZI	Р					
TITLE	T	DELETE	4,1 TT	LE				☐ Change	Addition	
NAME	ZORN, JOE	(\ 	4. 2 N	ME						
STREET ADDRESS	7101 HELMS RD		4.3 ST	REET ADI	ORESS					
CITY-ST-ZIP	PENSACOLA FL		4.4 CIT	Y-ST-ZIF	,					
TITLE		☐ DELETE	5.1 Til					Change	Addition	
NAME			5.2 NA	ME						
STREET ADORESS			5.3 ST	REET ADI	ORESS					
•				Y- \$T- ZIF	,					
TITLE TOTAL TOTAL	A Y region and a second and	☐ DELETE	6.1 TIT	LE .				☐ Change	Addition	
NAME	19代数 50		6.2 NA	ME						
STREET ADDRESS	4 mg 5 mg = 5 mg 4 mg 5 mg	•	6.3 ST	REET ADI	ORESS					
		•	1	Y-ST-ZIF						
CITY-ST-ZIP	16 1 41 16 17 17 17 17 17 17 17 17 17 17 17 17 17	0 0 0	the ave			ation 110 07/3\(ii) Florida Statut	on I further co	rtifu that the ir	formation	

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 informati indicated on this annual report or suppliemental 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, with all other like empowered.

SIGNATURE: