FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1998

/e\

1. Corporation Name (6)																
FIRST BAPTIST CHURCH OF GILLETTE, INC.																
A THE STREET STREET OF STREET STREET												1 .1.1 1.1.1		DJI BABA BIDA		6(6)) (86)
Principal Place of Business Malling Address																airii ilki
Principal Plac	alling Address															
S301 97TH STREET EAST					3301 97TH STREET EAST						3. Date Incorporated or Qualified					
PALMETTO FL 34221					PALMETTO FL 34221						05/20/1977					
											4	FO 0404E00				ied For
2. Principal P	lace of Busin	20	2a. Mailing Address						├	59-2181586				Applicable		
21					26						5.	. Certificate of Status Desired		\$8.75 Fee		
Suite, Apt. #. etc.					Suite, Apt. #, etc.						8.	. Election Campaign Financing		\$5.00	Ma	y Be
22					27						L	Trust Fund Contribution		bebbA	to F	908
City & State					City & State						7.	. Is this nonprofit corporation a hor			ion?	
Zip	Zip Country				28			Country			Yes No 8. This corporation owes or has paid the current year Intangible					
24	25			29	29			ю			Personal Property Tax due June 30. Yes No					
9. Name and Address of Current Registered Agent											10.	. Name and Address of New Reg	jetered	Agent		
								B1	1	Name						
SNELL, MR. RANDOLPH								82	!	Street Addre	Address (P.O. Box Number is Not Acceptable)					
10608 US HWY 41 N PALMETTO FL 34221								83	+							
PALMETTO PL 34221									1							
								84 City					FL	65 Zij	o Coo	de
11. Pursuant	to the provis	ions of	Sections 617.0502	2 and 6	17.1508, Flori	da Statut	es, 1	the abov	/0-	named corpo	ratio	on submits this statement for the pu	irpose o	f changing	its r	egistered
oπice or r agent. i a	egistereo ag m familiar w	jeni, oi lth, and	both, in the State sccept the obliga	or Flori itions o	da. Such char f. Section 617.	ige was a .0503, Fic	autn orida	orized b a Statute	y t 15.	the corporation	en s i	on submits this statement for the puboard of directors. I hereby accept	tine app	onument a	ıs reç	gistered
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required w												· · · · · · · · · · · · · · · · · · ·				
12.	12. Signature, typed or printed name of registered ager 12.									l signature requires		n reinsteling) ADDITIONS/CHANGES TO OFFICE	DATE FRS AND	DIRECTO	DRS I	N 12
TITLE	D		0111021107412	, Dillico	DI DI	ELETE	7	1.1 TITLE	_			7.50/110/10/07###020 10 011 10		Change		Addition
NAME	FLETCH	IER, J	OHN				1	1.2 NAME]						
STREET ADDRESS	3010 85TH ST. E.							1.3 STREET ADDRESS								
CITY-ST-ZIP	PALMET	TO F	<u> </u>		·		_	1.4 CITY-	ST-	ZiP						
TITLE	D		M I VAILI		□ D6	ELETE	1	2,1 TITLE						Change	L	Addition
NAME	TEACHEY, MRS. LYNN 905 24TH AVE W							2.2 NAME 2.3 STREET ADDRESS								
STREET ADDRESS City-St-Zip	PALMETTO FL				İ			2.4 CITY-ST-ZIP								1
TITLE	D	1011			DE	LETE	1	3.1 TITLE	31	-211				Change		Addition
NAME	TEACHE	EY. MI	L BOB				ı	3.2 NAME						•		
STREET ADDRESS	905 24T						1	3.3 STREE	T AI	DDAESS						
CITY-ST-ZIP	PALMET	TO FI						3.4. CITY-	ST-	-ZIP						
TITLE	SD				□ Di	ELETE		4.1 TITLE						Change		Addition
NAME	CADWELL, JOHN BUZBEE							4, 2 NAME								
STREET ADDRESS	4003 57						Į	4.3 STREE	T A	DDRESS [ļ
CITY-ST-ZIP	PALMET	IU F	<u> </u>		17 60) CTF	4	4.4 CITY-	ST-	ZIP				Chan		Addition
TITLE	PD	DANIO	OI DIL		□ DE	LEIE	Į	5.1 TITLE						Change		Addition
NAME CYDEET ADDRESS	SNELL,		NORTH				ı	5.2 NAME	, .,	nnatee						}
STREET ADDRESS City-St-Zip	PALMET						Į	5.4 CITY-1								
TITLE	1 MLME!	IV II	<u> </u>		☐ DE	LETE	1	6.1 TITLE	, , , , , , , , , , , , , , , , , , , 	LIT'				Change	<u></u>	Addition
NAME							1	6.2 NAME		}					_	
STREET ADDRESS						6.3 STRE			r ac	DDAESS !						
							ı			1						i

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 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.

FILED

Feb 09 1998 8:00am

Secretary of State