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NONPROFIT **CORPORATION ANNUAL REPORT** 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## **DOCUMENT # 744600**

ST. MARK MISSIONARY BAPTIST CHURCH, INC.

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.7221 SHERRILL		
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## **FILED** Feb 08, 1999 8:00am **Secretary of State**

02-08-1999 90015 025 \*\*\*\*61.25

Zip Country Zip Country 6. Election Campaign Financing Trust Fund Contribution Add  9. Name and Address of Current Registered Agent  SHEPARD, JOHN  3814 OKLAHOMA AVENUE TAMPA FL 33616  5. Certificate of Status Desired Sequence of Sequ	pplied For of Applicable Additional equired May Be to Fees  Code
Sulte, Apt. #, etc.    Sulte, Apt. #, etc.	ot Applicable Additional equired May Be to Fees  Code
City & State  City & State  City & State  City & State  Zip  Country  Add  301. Name and Address of New Registered Agent  SHEPARD, JOHN  SHEPARD,	ot Applicable Additional equired May Be to Fees  Code
City & State    City & State   28	Additional equired  May Be to Fees  Code  iregistered dispistered
28   28   28   29   20   20   20   20   20   20   20	May Be to Fees  Code  iregistered dispistered dispiste
Zip	Code Siregistered
SHEPARD, JOHN   SHEPARD, JOH	Code
SHEPARD, JOHN 3814 OKLAHOMA AVENUE TAMPA FL 33616  82 Street Address (P.O. Box Number is Not Acceptable)  84 City FL 85 Z  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 agent. I am familiar with, and accept the obligations of, section 617.0503, Florida Statutes, the above-named corporation's board of directors. I hiereby accept the appointment as agent. I am familiar with, and accept the obligations of, section 617.0503, Florida Statutes.  SIGNATURE Signature, typed or printed name of registered agent and title of spokicoble.  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. CITY-ST-ZP  TITLE CTR REDDISH, TYRONE W 12. WARE STREET ADDRESS CITY-ST-ZP TAMPA FL 14. CITY-ST-ZP 14. CITY-ST-ZP 14. CITY-ST-ZP 15. TAMPA FL 16. CHANGE STREET ADDRESS CITY-ST-ZP TAMPA FL 17. CHANGE STREET ADDRESS CITY-ST-ZP TAMPA, FL 0 18. CHANGE STREET ADDRESS CITY-ST-ZP TAMPA, FL 0 19. CHANGE STREET ADDRESS CITY-ST-ZP TAMPA STREET ADDRESS CITY-ST-ZP TAMPA STREET ADDRESS CITY-ST-ZP	s registered
SHEPARD, JOHN 3814 OKLAHOMA AVENUE TAMPA FL 33616  82 Street Address (P.O. Box Number is Not Acceptable)  83 ACTIVE Superbord agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. In the Provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE Signature, typed or printed name of registered agent and tible if applicable. (NOTE: Registered Agent signature required when remistating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. CITY. ST. ZIP  TITLE  CTR  DELETE  1.1 TITLE  TR  DELETE  1.2 TAMPA FL  1.2 STREET ADDRESS  8103 JAD DR  1.3 STREET ADDRESS  8103 JAD DR  1.4 CITY. ST. ZIP  TAMPA, FL 0  1.4 CITY. ST. ZIP  TAMPA, FL 0  1.4 CITY. ST. ZIP  TAMPA, FL 0  1.5 Changes STREET ADDRESS  1.5	s registered
TAMPA FL 33616  TAMPA FL 33616  84 City  FL 85 Z  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 or registered agent, or both, in the State of Florida: Such change was authorized by the corporation's board of directors. Thereby accept the appointment as agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and tible if applicable.  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  TILE  CTR  RAME  REDDISH, TYRONE W  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  TR  DELETE  1.1 ITILE  1.2 ITILE  TR  DELETE  2.2 INJUE  2.2 INJUE  2.2 INJUE  2.3 STREET ADDRESS  CITY-ST-ZIP  TAMPA, FL 0  DELETE  TIR  DELETE  3.1 TITLE  TR  DELETE  3.1 TITLE  Changes  3.2 NAME  STREET ADDRESS  CITY-ST-ZIP  TAMPA, FL 0  DELETE  3.1 TITLE  TR  DELETE  3.1 TITLE  Changes  3.2 NAME  STREET ADDRESS  CITY-ST-ZIP  TAMPA, FL 0  DELETE  3.1 TITLE  Changes  3.3 STREET ADDRESS  CITY-ST-ZIP  TAMPA, FL 0  DELETE  3.1 TITLE  Changes  3.2 NAME  STREET ADDRESS  CITY-ST-ZIP  TAMPA, FL 0  DELETE  4.1 TITLE  Changes  3.3 STREET ADDRESS  CITY-ST-ZIP  TAMPA, FL 0  DELETE  4.1 TITLE  Changes  CITY-ST-ZIP  TAMPA  TAMPA FL  4.2 CITY-ST-ZIP  TAMPA  TAMPA  TAMPA  TAMPA  TAMPA  TAMPA  T	s registered
TAMPA FL 33616  84 City FL 85 Z  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 agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing of the corporation's board of directors. I hereby accept the appointment as agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing of the corporation's board of directors. I hereby accept the appointment as agent. I am familiar with, and accept the obligations of directors. I hereby accept the appointment as agent. I all the corporation's board of directors. I hereby accept the appointment as agent. I all the corporation's board of directors. I hereby accept the appointment as agent. I all the corporation's board of directors. I hereby accept the appointment as agent. I all the corporation's board of directors. I hereby accept the appointment as agent and the purpose of changing agent and the purpo	s registered
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### PIL   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 agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  ### Signature, typad or printed name of registered agent and title if applicable.	s registered
Agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.    Signature   Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE	registered agistered
12. OFFICERS AND DIRECTORS  TITLE  CTR  REDDISH, TYRONE W  STREET ADDRESS CITY-ST-ZIP  TITLE  TR  DELETE  1.1 TITLE  1.2 NAME  STREET ADDRESS CITY-ST-ZIP  TITLE  TR  DELETE  2.1 TITLE  MYERS, RANDOLPH  2.2 NAME  STREET ADDRESS CITY-ST-ZIP  TAMPA, FL 0  TITLE  TR  DELETE  2.3 STREET ADDRESS CITY-ST-ZIP  THOMAS, ROY  STREET ADDRESS TAMPA, FL 0  TITLE  RAME  STREET ADDRESS TAMPA, FL 0  THOMAS, ROY  STREET ADDRESS TAMPA, FL 0  TITLE  S  REDDISH, JOYCE W  STREET ADDRESS STREET ADDRESS CITY-ST-ZIP  TAMPA FL  A3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP  TAMPA FL  A4 CITY-ST-ZIP  TAMPA FL  A4 CITY-ST-ZIP  TAMPA FL	
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STREET ADDRESS CITY-ST-ZIP TAMPA FL TR DELETE TITLE TR MYERS, RANDOLPH STREET ADDRESS CITY-ST-ZIP TAMPA, FL 0 TR DELETE Z1 TITLE Z2 NAME Z2 NAME Z3 STREET ADDRESS CITY-ST-ZIP TAMPA, FL 0 THOMAS, ROY STREET ADDRESS TAMPA, FL 0 THOMAS, ROY STREET ADDRESS TAMPA, FL 0 THUE S TREET ADDRESS TAMPA, FL 0 THUE S TREET ADDRESS TAMPA, FL 0 THUE STREET ADDRESS TAMPA S	Addition
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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	
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; the 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 a Block 12 or Block 13 if changed, or on an attachment with an address with all other like empowered.	☐ Addition