FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

744660

(2)

Mailing Address

BAPTIST MISSIONS TO THE INCARCERATED, INC.

2590 W. LAKE		2590 W. LAKE DR.				3. Date Incorporated or Qualified		
DELAND FL 32724 US		DELAND FL 32724 US	DELAND FL 32724			10/21/1978		
83		00				4. FEI Number Applied	For	
						59-1831656 Not App	olicable	
2. Principal P	ace of Business	2a. Mailing Address	2a. Mailing Address			5. Certificate of Status Desired S8.75 Addition		
21		26				Fee Require	d	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				6. Election Campaign Financing \$5.00 May Be		
22		27 City & State	City & State			Trust Fund Contribution		
City & State	3	28				7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No		
Zip	Country	Zip	Col	untry		8. This corporation owes or has paid the current year Intangib	ole	
24	25	29	30			Personal Property Tax due June 30. Yes No		
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
				81	Name			
	FRANK C.		82 Street Ad		Street Addr	dress (P.O. Box Number is Not Acceptable)		
	NAUTILUS DRIVE SPRINGS FL 34434							
Cilnus	3FAINGS FE 34434							
				84	City	FL 85 Zip Code		
11. Pursuant	to the provisions of Sections 617.05	02 and 617.1508, Florida Stati	utes, the a	bove	-named corr	poration submits this statement for the purpose of changing its registion's board of directors. I hereby accept the appointment as register.	istered	
office or ragent, I a	egistered agent, or both, in the Stat m familiar with, and accept the obli	e of Florida, Such change was gations of, Section 617.0503, F	s autriorize Florida Sta	tutes	ine corporat	tion's board of directors. Thereby accept the appointment as regist	reten	
SIGNATURE _								
40	Signature, typed or printed name of registered a	gent and little if applicable. (NO ND DIRECTORS	13.	ed Age	nt signature requi	ired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	10	
12.	PD OFFICERS AI		DELETE 1.1 TI				Addition	
NAME	MORSE, FRANK (REV)		1.2 N					
STREET ADDRESS	2383 W NAUTILUS DRIVE		1.3 STREE		ADDDESS			
			ITY-S					
CITY-ST-ZIP TITLE	TD	DELETE			1-215	Change	Addition	
NAME	GRIFFIS, FRANKLIN	-		IAME				
					ADDRESS			
STREET ADDRESS				CITY-S		4		
CITY - ST - ZIP TITLE			2.4 t		1-712	Change	Addition	
NAME			IAME					
STREET ADDRESS	00201, 0, unico (1121)				ADDRESS			
	11.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1		CITY-S					
CITY-ST-ZIP TITLE	D DELETE 4.11			1 - 4/1	☐ Change	Addition		
NAME	BALSLEY, ALLEN REV.			NAME		– • –		
STREET ADDRESS	3820 SHEPHERD RD.		4.3 STREE		ADDRESS			
CITY-ST-ZIP	MULBERRY FL							
TITLE	D	DELETE		4.4 CITY-ST-ZIP 5.1 TITLE		Change	Addition	
NAME	SMITH, STANELY (REV)		5.2 NA			•		
STREET ADDRESS	Control of the Control				ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP				
TITLE				TLE		☐ Change ☐	Addition	
NAME	_		6.2 N					
1 MATAIL				6 2 CTOSET ADDRESS				

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.

SIGNATURE:

RENGHALLER MAUSEL

1-15-97 (352) 465-3116

FILED

Jan 27 1998 8:00am

Secretary of State

CR2E037 (10/97)