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NONPROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

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DOCUMENT # 752997

1. Corporation Name
HOPEWELL BAPTIST CHURCH, INC.

Principal Place of Business	Mailing Address
6001 S.STATE RD.39 PLANT CITY FL 33567	6001 S.STATE RD.39 PLANT CITY FL 33567

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 Country 25	Zip 29 Country 30

3. Date Incorporated or Qualified: 06/17/1980
4. FEI Number: 59-2011248 ☐ Applied For ☐ Not Applicable
5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
WATKINS, E. C., JR. 2010 S. BUGG RD. PLANT CITY FL 33567	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

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 ____________ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☒ DELETE	1.1 TITLE	P	☐ Change ☒ Addition
NAME	SANDERS, KENNETH, G		1.2 NAME	GREGORY, Joe	
STREET ADDRESS	2706 WOODLAND HILLS AVE		1.3 STREET ADDRESS	2218 Tanglewood Way	
CITY-ST-ZIP	LAKELAND FL		1.4 CITY-ST-ZIP	BRANDON, FL 33511	
TITLE	T	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	BUGG, BETH		2.2 NAME		
STREET ADDRESS	402 E. MCDONALD RD		2.3 STREET ADDRESS		
CITY-ST-ZIP	PLANT CITY, FL 00000		2.4 CITY-ST-ZIP		
TITLE	S	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	DURRANCE, MARTHA		3.2 NAME		
STREET ADDRESS	3472 SILVERSTONE COURT		3.3 STREET ADDRESS		
CITY-ST-ZIP	PLANT CITY FL		3.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	HASTY, JOHN		4.2 NAME		
STREET ADDRESS	4610 S.DRAWDY RD.		4.3 STREET ADDRESS		
CITY-ST-ZIP	PLANT CITY, FL 00000		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE	VP D	☒ Change ☐ Addition
NAME	EVERS, LLOYD		5.2 NAME		
STREET ADDRESS	7808 SOUTH S.R. 39		5.3 STREET ADDRESS		
CITY-ST-ZIP	PLANT CITY, FL 00000		5.4 CITY-ST-ZIP		
TITLE	VPD	☐ DELETE	6.1 TITLE	D	☒ Change ☐ Addition
NAME	WILLIS, HARRELL J		6.2 NAME		
STREET ADDRESS	6002 SOUTH S.R. 39		6.3 STREET ADDRESS		
CITY-ST-ZIP	PLANT CITY FL		6.4 CITY-ST-ZIP		

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, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 4/14/99 813-737-3034
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (11/98)