

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Apr 16, 1999 8:00 am
Secretary of State

04-16-1999 90077 028 ****61.25

DOCUMENT # 754275

1. Corporation Name

First Baptist Church Of Oakland Local Development
Company, Incorporated

Principal Place of Business

Mailing Address

FBC Local Development, Inc 1027 Jessie Street
1027 Jessie Street Jacksonville, FL 32206-5714
Jacksonville, FL 32206-5714

2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

21

26

09/22/1980

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

Applied For

22

27

59-1695897

Not Applicable

City & State

City & State

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

23

28

Zip Country

Zip Country

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Dailey, Rev. Charles B.
2572 Beautyberry Circle West
Jacksonville, FL 32246

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE
NAME Dailey, Charles
STREET ADDRESS 2572 Beautyberry Cir. West
CITY-ST-ZIP Jacksonville, FL

1.1 TITLE D ☐ Change ☒ Addition
1.2 NAME Warren, Cleve
1.3 STREET ADDRESS 10543 Arrowhead Ct.
1.4 CITY-ST-ZIP Jacksonville, FL

TITLE VD ☐ DELETE
NAME Norman, Earvin
STREET ADDRESS 2437 Barry Dr. South
CITY-ST-ZIP Jacksonville, FL

2.1 TITLE D ☐ Change ☒ Addition
2.2 NAME Burney, Calvin
2.3 STREET ADDRESS 5626 International Dr
2.4 CITY-ST-ZIP Jacksonville, FL

TITLE SD ☐ DELETE
NAME Johnson, Jesse
STREET ADDRESS 6614 Ector PL
CITY-ST-ZIP Jacksonville, FL

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME Jones, Herman
STREET ADDRESS 2188 W. 30th St
CITY-ST-ZIP Jacksonville, FL

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE TD ☐ DELETE
NAME Howell, James
STREET ADDRESS 3805 Marlo St
CITY-ST-ZIP Jacksonville, FL

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)