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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF GTATE

Sandra B. Mortham

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Apr 14 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT # 755

/41

MOUNT OLIVE FREE WILL BAPTIST CHURCH, INC.

Principal Place of Business Mailing Address Mailing Address MT OLIVE FREEWILL BAPTIST CHURCH INC PO BOX 864 BARTOW FL 33830 US 2. Principal Place of Business 2a. Mailing Address 2b. Mailing Address 2c. Principal Place of Business 2c. Principal Place of Business 2d. Mailing Address 2d. Mailing Address 2f. City & State 2f. City & State 2f. Country Description of Business Applied For Description of Status Desired Suite, Apt. #, etc. 2f. Country Description of Business Applied For Description of Status Desired Suite, Apt. #, etc. 2f. Country Description of Business Applied For Description of Status Desired Suite, Apt. #, etc. 2f. Country Description of Business Applied For Description of Status Desired Suite, Apt. #, etc. 2f. Country Description of Business Applied For Description of Status Desired Suite, Apt. #, etc. 2f. Country Description of Business Applied For Description of Status Desired Suite, Apt. #, etc. 2f. Country Description of Business Applied For Description of Status Desired Suite, Apt. #, etc. 2f. Country Description of Business Applied For Description of Status Desired Suite, Apt. #, etc. 2f. Certificate of Status Desired Fee Required City & State City & State City & State City & State Bartow FL 33831-0664
1306 SCOTT CIRCLE BARTOW FL 33830 BARTOW FL 33831-0864 US 3. Date Incorporated or Qualified Iz/03/1980 3a. Date of Lasi Report Iz/03/1980 08/02/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable
BARTOW FL 33830 US BARTOW FL 33831-0864 US 3. Date Incorporated or Qualified 12/03/1980 3. Date Incorporated or Qualified 08/02/1996 2. Principal Place of Business 2e. Mailing Address 2fp 3. Date Incorporated or Qualified 08/02/1996 4. FEI Number 59-2570555 Applied For Not Applicable 50 Not A
US 2. Principal Place of Businoss 2a. Mailing Address 25 Suite, Apt. #, etc. 27 City & State City & State Zip Country 3. Date Incorporated or Qualified 12/03/1980 4. FEI Number 59-2570555 Applied For Not Applicable 59-2570555 Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required Fee Required Fee Required 55.00 May Be Added to Fees 759 Country 3. Date Incorporated or Qualified 12/08/1980 Applied For Not Applicable 59-2570555 Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required Fee Required 6. Election Campaign Financing Added to Fees 759 Applied For Not Applicable 59-2570555 Suite, Apt. #, etc. 5. Certificate of Status Desired Added to Fees 7500 May Be 7
2. Principal Place of Business 2. Mailing Address 2. Mailing Address 2. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State Zip Country Country 4. FEI Number 59-2570555 Applied For Not Applicable \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution Added to Fees Applied For Not Applied For
2. Principal Place of Business 2a. Mailing Address 2b. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Zip Country Country Applied For 59-2570555 Not Applied For 59-2570555 Not Applied For 59-2570555 Not Applied For 59-2570555 Not Applied For 59-2570555 Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required Fee Required 6. Election Campaign Financing 70-10-10-10-10-10-10-10-10-10-10-10-10-10
Suite, Apt. #, etc. 22 Suite, Apt. #, etc. 27 City & State City & State City & State Country Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing Fee Required Added to Fees Added to Fees This corporation has liability for intangible tax under s. 199.032,
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23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intengible tax under s. 199.032,
Zip Country Zip Country Country Country Country 8. This corporation has liability for intangible tax under s. 199.032,
6. This corporation has hability for intengible tax under s. 199,032,
24 25 29 30 Florida Statutes Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent
81 Name
RUDOLPH, CATHERINE 82 Street Address (P.O. Box Number is Not Acceptable)
6215 JUBILEE LANE
LAKELAND FL 33813 83
84 City 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 registored agont and title if applicable. (NOTE: Registored Agent signature required when reinstating) DATE
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE P DELETE 1.5 TITLE 1.1-Title -D M Change Addition
NAME FARLEY, ANDREW STREET ADDRESS 2190 E. GIBBONS ST. 12 NAME Farley, Andrew 13 STREET ADDRESS C.
DADTOW E
CITY-ST-ZIP BARTOW PL 14 CITY-ST-ZIP BARTOW F1 TITLE 8 DELETE 21 TITLE Change Addition
DIDOLOL ALTERNIE
ANTE HIDU EE FAI
LAVCIAND EL 20012
CITY-ST-ZIP LANELAND FL 33813 2, 4 CITY-S1-ZIP TITLE DELETE 3.1 TITLE Change Addition
NAME DIXON, ELMER 3.2 NAME
AIRNETU AAC
DADTOM EL 22020
NAME MARSHALL, EDGAR 4.2 NAME
4000 HOAVED CT
PADTOW C
CITY-ST-ZIP DARTOW FL 44 CITY-ST-ZIP TITLE D DELETE 5.1 TiTLE Change Addition
NAME SAMS, RICHARD 5.2 NAME
STREET ADDRESS 930 CARVER AVENUE 5.3 STREET ADDRESS
CITY-ST-ZIP BARTOW FL 6.4 CITY-S1-ZIP
TILE DELETE 6.1 VITLE Change Addition
NAME 62 NAME
STREET ADDRESS 6.3 STREET ADDRESS

CHY-S1-ZIP

14. I do 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.