FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

FILED						
Apr 14 1998 8:00am						
Secretary of State						

	19	98	THE THE	DIVISION OF CO	PORATIONS	Scoretary of State		
P	OCUME Corporation Na	ENT #	756690	(4)				
WILLOW OAK BAPTIST CHURCH, INC. Principal Place of Business Mailing Address								
3390 WILLOW OAK RD 3390 WILLOW OAK RD								
P O BOX 466 P O BOX 466						3. Date Incorporated or Qualified 03/09/1981		
MULBERRY FL 33860				MULBERRY FL 33960		4. FEI Number Applied For		
						59-2369638 Not Applicable		
2. Principal Place of Business				2a. Mailing Address		5. Certificate of Status Desired S8.75 Additional		
21	21			26		Fee Required		
Suite, Apt. #, etc.				Suite, Apt. #, etc.		6. Election Campaign Financing \$5.00 May Be		
22	City & State			City & State		Trust Fund Contribution Added to Fees 7. Is this nonprofit corporation a homeowners association?		
23				28		Yes No		
	Zip		Country	Zip	Country	This corporation owes or has paid the current year intangible		
24		20		29 3	o]	Personal Property Tax due June 30. Yes No		
	9.	. Name ar	d Address of Current R	egistered Agent	81 Nam	10. Name and Address of New Registered Agent		
	101150 1.7				bi Nan	ame		
	JONES, J T					82 Street Address (P.O. Box Number is Not Acceptable)		
PIERCE ROAD					83			
MULBERRY, FL 33860								
l	00000				84 City	ty 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 at						harure required when reinstating) DATE		
12			OFFICERS AND D	DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change X Addition		
NA.		, IONES, J	т	L. Detter	1.1 THE	Rudd, Samuel		
		BLUFF RE			1.3 STREET ADDRES			
			Y, FL 00000		1.4 CITY-ST-ZIP			
TIT		YD OF	.,	☐ OELETE	2.1 TITLE	☐ Change ☐ Addition		
NA.	ME V	MELLS, C	ARL M.		2.2 NAME			
STF	REET ADDRESS 3	3465 JAM	IE ST.		2.3 STREET ADDRES	RESS		
_			Y, FL 00000		2.4 CITY-ST-ZIP			
TIT		•		☐ DELETE	3.1 TITLE	Change Addition		
M			JACK JR.		3.2 NAME			
1		171 NW 1			3.3 STREET ADDRES			
tm		<u>Mulberr</u> To	T FL	☐ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	Change Addition		
I MAI	, ,	_	/ILLIAM J.	otten	4. 2 NAME	L Change L Addition		
ı		1070 WAL			4.3 STREET ADDRES	AESS I		
l			Y, FL 00000		4.4 CITY-ST-ZIP			
TIT)	-,	▼ DELETE	5.1 TITLE	Change Addition		
NA	ME V	MINSLOW	, BLAKE		5.2 NAME			
STF	EET ADDRESS 4	1170 OLD	COLONY RD		5.3 STREET ADDRES	NESS .		
СП		MULBERR	Y PL		5.4 CITY-ST-ZIP			
TIT	LE C)S		☐ DELETE	6.1 TITLE	Change Addition		

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.

6.3 STREET ADDRESS

6.2 NAME

SIGNATURE:

NAME STREET ADDRESS SLOAN, JACKIE H.

4070 WALYN DR.

13 (14 14 Dackie H. Sloen 4/5/98 941-425-1427