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

(9)

DOCUMENT # FIRST BAPTIST CHURCH OF LEESBURG FOUNDATION, INC Principal Place of Business Mailing Address 220 N. 13TH STREET 220 N. 13TH STREET 3. Date Incorporated or Qualified LEE\$BURG FL 32748-4962 LEESBURG FL 32748-4962 12/09/1981 4. FEI Number Applied For 59-2209184 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 26 Fee Required Sulte, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 27 **Trust Fund Contribution** Added to Fees Oity & State City & State 7. Is this nonprofit corporation a homeowners association? 28 Yes ☐ No Ζiρ Country Zip Country 8. This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. ☐ Yes . Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent lumber is Not Acceptable) CUMMINS.NORMAN C. 1009 N. 14TH STREET BeND R3 LEESBURG FL 32748 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits his 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. 84 5198 SIGNATURE 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 1, TITLE DELETE 1.1 TITLE Change Addition JONES, RANDY Walker, James NAME 1.2 NAME STREET ADDRESS 2336 W. MAIN 1.3 STREET ADDRESS 1009 Cottonwood LEESBURG FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE Addition 2.1 TITLE **B**AKER, PEGGY NAME Huscha Lannut DR 2.2 NAME 2341 CONESTOGA DRIVE STREET ADDRESS 2.3 STREET ADDRESS LEESBURG FL 34748 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE ☐ Change TITLE 3.1 TITLE Addition NAME BAKER, PEGGY 32 NAME **3 LAKE GRIFFIN DR** STREET ADDRESS 3.3 STREET ADDRESS FRUITLAND PARK FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE ☐ Change Addition BLANCHARD, JUDY 4. 2 NAME STREET ADDRESS 33045 LAKE BEND CIRCLE 4.3 STREET ADDRESS LEESBURG FL CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Chance Addition MCLEOD, JOHN D NAME 5.2 NAME \$2124 KINNE PEARCE RD. STREET ADDRESS **5.3 STREET ADDRESS** leesburg fl CITY-ST-ZIP 5.4 CITY - ST-ZIP DELETE TITLE 6.1 TITLE ☐ Change Addition NAME JONES, AL 6.2 NAME **5**03 GIBSTON STREET **STREET ADDRESS 6.3 STREET ADORESS** LEESBURG FL *CITY-\$T-ZIP 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 13 if changed, or on an attachment with an address.

FILED

May 20 1998 8:00am

Secretary of State