## FILE NOW: FILING FEE IS \$61.25

NCNPROFIT
CORPORATION
ANNUAL REPORT



Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

STREET ADDRESS

763074

(2)

1. Corporation	n Name	T (2)	•			
MURDO	ock baptist church, in	IC.		1 (BEI) 1864 BAGA HIN BENG (BE)	ir Brâss BiBle Brâss âtâns âtâns spâr	
Principal Place of Business		Mailing Address	* ****	I ANDRILL ANDLO BELDO ILLAS BURIL FUELL QUEL BUI	N MINST NIEST KARIS NEDIS MENSE NAME	
18375 TOLEDO BLADE BLVD		P.O. BOX 0484		3. Date Incorporated or Qualified	· · · · · · · · · · · · · · · · · · ·	
PORT CHARLOTTE FL 33948		MURDOCK FL 33938		04/30/1982		
İ		US		4. FEI Number	Applied For	
O. Dringing Disco of Durings		1 A . A . W A		59-2147569	Not Applicable	
2. Principal Place of Business		2a. Malling Address		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. Election Campaign Financing	\$5,00 May Be	
22		27		Trust Fund Contribution	Added to Fees	
City & State		City & State			7. Is this nonprofit corporation a homeowners association?	
Zip	Country	<b>Zip</b>	Country	8. This corporation owes or has paid the		
24	25	} <del></del> -, ⊢	30	Personal Property Tax due June 30.	Yes X No	
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Register	ed Agent	
			81 Name	Joan R. Denisch		
BAKER, SANDRA			82 Street	Address (P.O. Box Number is Not Acceptable)		
530 BURNING TREE LIN			83	3277 Gabor St.		
PUNTA GORDA FL 33982			<u> </u>		·	
,	•		84 City	Port Charlotte	25 Zip Code 33948	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above office or registered agent, or both, in the State of Florida Such change was authorized by agent. I am familiar with, and accept the obligations of Section 617.0503 Aorida Statutes						
agent. I a	egistered agent, or both, in the State im familiar with, and accept the obliq	e of Florida: Such change was all pations of Section 617.0503	ida Statutes.	poration's board of directors. I hereby accept the	appointment as registered	
SIGNATURE	Ioan Denisch	Jone & le	Desusc	e required when reinstating) DA	1/22/98	
12.	Signature, typed or printed name of registered ag OFFICERS AN	ND DIRECTORS	Hegistered Agent signature 13.	e required when reinstating) DA' ADDITIONS/CHANGES TO OFFICERS		
TITLE	D	☐ DELETE	1.1 TITLE	Tr	Change & Addition	
NAME	HUNTER, ALAN D		1.2 NAME	Carroll Byrd		
STREET ADDRESS	437 HAZEL CIRCLE		1.3 STREET ADDRESS	341 Capatola Street		
CITY-ST-ZIP	PUNTA GORDA FL 33982		1.4 CITY-ST-ZIP	Port Charlotte, F1. 33948		
TITLE	D	☐ DELETE	2.1 TITLE	Tr	Change Se Addition	
NAME	VERNON, IVOR	•	2.2 NAME	Irving Webb		
STREET ADDRESS	3205 PELLAM BLVD		2.3 STREET ADDRESS	1518 Dorchester Street		
CITY-ST-ZIP TITLE	PORT CHARLOTTE FL D	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE	Port Charlotte, F1	☐ Change 😼 Addition	
NAME	PETTIT, ROBERT V	AN DECEME	3.2 NAME	IT Voan Denisch	C craige GO Monitor	
STREET ADDRESS	17371 SEYMOUR		3.3 STREET ADDRESS	3277 Gabor Street		
	PORT CHARLOTTE FL			Port Charlotte, F1 33948		
CITY-ST-ZIP	C	DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		Change by Addition	
NAME	LUCAS, DAVID		- T	S Ciarmon David		
STREET ADDRESS	20132 LORENZO AVE.			Giovanna Byrd		
CITY-ST-ZIP	PORT CHARLOTTE FL 33952	)	4.4 CITY - ST - ZIP	341 Capatola Street		
TITLE .	- S	DELETE	5.1 TITLE	Port Charlotte, Fl 33948	Change Addition	
NAME	PETTIT, ROBERT	-	5.2 NAME			
STREET ADDRESS	17371 SEYMOUR		5.3 STREET ADDRESS			
CITY-ST-ZIP	PORT CHARLOTTE FL 33953	3	5.4 CITY-ST-ZIP			
TITLE	1	X DELETE	6.1 TITLE		☐ Change ☐ Addition	
NAME	CHILL ADDIE 1	• •	6.2 NAME		ļ.	

14. Thereby 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 suppliemental 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

CONSTUDE CO TOUR AND WEST WITH

3277 GABOR STREET

PORT CHARLOTTE FL 33948

1/22/98

627-6648

**FILED** 

Feb 17 1998 8:00am

Secretary of State

CR2E037 (10/97)