FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 765975

PRIMERA IGLESIA BAUTISTA HISPANA DE DOVER, INCOR PORATED

Principal Place of Business								
P O BOX 355								
SYDNEY FL 33587-7755								

2. Principal Place of Business

21

Mailing Address

P O BOX 355

SYDNEY FL 33587-7755

2a. Mailing Address 26 P.O. Box 355

FILED Apr 09, 1999 8:00 am Secretary of State

04-09-1999 90020 032 ****61.25



3. Date Incorporated or Qualifed

12/03/1982

City & State	Suite, Apt. #, etc.		Suite, Apt. #, etc.			4. FEI Number		Apr	olied For	
28 Sydney	22		27	7		59-2443076		Not	Applicable	
28 Sydney FL 33587-7755 30 H111.9bcroup 1 27 27 27 27 27 27 27						E. C. Alfanta of Chatta Desired		\$8.75 Additional		
Zip Country 2 3 3 3 7 8 7 - 7 7 5 30 H 1111 sbcrouts Trust Fund Compribution Additor to Fees Addition See Add	¬ ·			3587-7	7755	5. Certificate of Status Desired	L)	Fee Required		
9. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent 81 Name DELGADO, DAVID 702 INNERGARY PLACE VALRICO FL 33594 11. Pursuant to the provisions of Sections 817,0502 and 617,1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0503. Piorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0503. Piorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0503. Piorida Statutes, the above-named 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. Piorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0503. Piorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617,0503. Piorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0503. Piorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. 82 In a corporation submits this statement for the purpose of changing its registered defined or submits this statement for the purpose of changing its registered defined or submits this statement for the purpose of changing its registered agent.						6. Election Campaign Financing		\$5.00	Mav Be	
9. Name and Address of Current Registered Agent. St	24				llaborou		Ц			
DELGADO, DAVID 702 INNERGARY PLACE VALRICO FL 33594 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 85 Zip Code 111. 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 agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. 86 City FL 85 Zip Code 111. 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 egistered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. 810 SIGNATURE 810 Signature, Speed or printed rame of registered agent and ties it applicable. 911 Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes. 912 Signature, Speed or printed rame of registered agent and signature registered agent signature registered agent signature registered agent signature registered agent. I am Scatteria Statutes. 912 OFFICERS AND DIRECTORS IN 12 112 NAWE 112 NAWE 113 TITLE 114 CITY-ST-2P 115 Change 116 Change 117 Change 117 Change 118 Change 119 Change 119 Change 119 Change 110 Change 111 Change 112 Change 112 Change 113 Change 114 City St-2P 115 Change		- <u> </u>			resporod	810. Name and Address of New I	Registered A	gent		
TOZ INNERGARY PLACE VALRICO FL 33594 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 817.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, and accept the ocligations of Section 617.0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the ocligations of Section 617.0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am femiliar with, and accept the ocligations of Section 617.0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am femiliar with, and accept the ocligations of Section 617.0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am femiliar with a properties of the appointment as registered agent. I am femiliar with a properties of the appointment as registered agent. I am femiliar with a properties of the appointment as registered agent. I am femiliar with a properties of the appointment as registered agent. I am femiliar with a properties of the appointment as registered agent. I am femiliar with a properties of the appointment as registered agent. I am femiliar with a properties of the appointment as registered agent. I am femiliar with a properties of the appointment as registered agent. I am femiliar with a properties of the appointment as registered agent. I am femiliar with a properties of the appointment as registered agent. I am femiliar with a properties of the appointment as registered agent. I am femiliar with a properties of the appointment as registered agent. I am femiliar with a properties of the appointment as regist	, , ,			81	81 Name					
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### City FL 85 Zip Code ### City Code Zip Code ### City Code Zip Code ### City				83	83					
17. Pursuant to the provisions of Sections 517.0502 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 The summary of registered agent agent agent agent agent agent agent agent agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes. SIGNATURE To OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE TR ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. WARE 12. STREET ADDRESS STONEY FL 33587 13. TITLE 12. NAME 13. STREET ADDRESS P O BOX 556 N/A 13. STREET ADDRESS 14. CITY-ST-2P 17. WARE 13. TITLE 12. NAME 13. STREET ADDRESS 14. CITY-ST-2P 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. Change Addition Additio	VALHICU	FL 33394								
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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 changes or on an attachment with an address, with all other like empowered.

SIGNATURE: 10

813-654-6533

Daytime Phone #