FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Feb 03 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

771092

(4)

FIRST FREE WILL BAPTIST CHURCH OF AUBURNDALE, FL ORIDA, INC.

Principal Place	e of Business	Mailing Address	Mailing Address			
LE. FLORIDA. INC.		LE. FLORIDA, INC.				3. Date Incorporated or Qualified
107 ROSE ST		107 ROSE ST			11/04/1983	
AUBURNDALE FL 33823 US		AUBURNDALE FL 33823 US			4. FEI Number Applied For	
30					59-2514301 Not Applicable	
2. Principal Place of Business 21		2a. Mailing Address 26		30 ca	5. Certificate of Status Desired S8.75 Additional Fee Required	
Suite, Apt, #, etc.		Suite, Apt. #, etc.			6. Election Campaign Financing \$5.00 May Be	
22		27			Trust Fund Contribution	
City & State	e	City & State				7. Is this nonprofit corporation a homeowners association?
23 Zip	Country	28	Count	irv		8. This corporation owes or has paid the current year Intangible
24	25	29 30	_	,		Personal Property Tax due June 30. Yes No
	9. Name and Address of Curren					10. Name and Address of New Registered Agent
			8	1	Name	
WEITMAN, LESTER			8	2	Street Addr	iress (P.O. Box Number is Not Acceptable)
107 ROSE ST			L			
AUBURN	IDALE FL 33823		8	3		
					City	FL 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						
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, and accept the obligations of Section 617,0503, Florida Statutes.						
SIGNATURE	Sesur Men	DAM LESTEY	WE	_	tmax	ulred when reinspaters) DATE
12.	Signature, typed or printed name of registered age OFFICERS AND		13.	gen	signature requi	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	:		☐ Change ☐ Addition
NAME	LYNN, SANFORD H		1,2 NAM	E		
STREET ADDRESS	113 CLAYTON ROAD		1,3 STRE	ET A	DDRESS	
CITY-ST-ZIP	AUBURNDALE FL		1.4 CITY	-ST-	ZIP	
TITLE	D	DELETE	2.1 TITLE			Change Addition
NAME	Paul, Maxwell		2.2 NAM	Ε	- 1	
STREET ADDRESS	106 PIKE STREET		2.3 STRE	ET A	DDRESS	
CITY-ST-ZIP	AUBURNDALE FL		2. 4 CITY			
TITLE	SD STORY	X DELETE	3.1 TITLE			Change K Addition
NAME	PARRISH, SARAH J		3.2 NAM	-	W	EITMAN, MELANIE L 110 AVE T. N.W.
STREET ADDRESS	4245 K-VILLE AVENUE		3.3 STRE		1.6.7	INTER HAVEN, FL.
CITY-ST-ZIP	AUBURNDALE FL TD	DELETE	3.4. CITY 4.1 TITLE		-ZIP W 3	Change Addition
TITLE NAME	LYNN, SHARON J		4.1 111L			
	113 CLAYTON ROAD		4. 2 NAW		nnogge	
STREET ADORESS	AUBURNDALE FL		4.4 CITY			
CITY-ST-ZIP	D D	☐ DELETE	5,1 TITLE		· ZIF	☐ Change ☐ Addition
NAME	DAVIS. W.F.		5.2 NAM			• —
STREET ADDRESS	811 MELTON AVENUE		5.3 STRE		DDRESS	
CITY-ST-ZIP	AUBURNDALE FL		5.4 CITY			
TITLE	PD	DELETE	6.1 TITLE			☐ Change ☐ Addition
NAME	WEITMAN, LESTER		6.2 NAM	Ε	1	
STREET ADDRESS	107 ROSE ST.		6,3 STRE	ET A	DDRESS	
	ALIDUDADALE EL					

14. I hereby certify that the information supplied with this filling 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.

SIGNATURE

SIGNATURE

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