

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Apr 26, 1999 8:00 am**  
**Secretary of State**

04-26-1999 90042 045 \*\*\*\*61.25

**DOCUMENT # N02049**

1. Corporation Name

**CENTRAL BAPTIST CHURCH OF SANFORD, FLORIDA, INC.**

Principal Place of Business

3101 WEST FIRST STREET  
SANFORD FL 32771

Mailing Address

~~3101 WEST FIRST STREET~~  
SANFORD FL 32771

3101 W. State Road 46



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

03/20/1984

4. FEI Number

59-1499968

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

9. Name and Address of Current Registered Agent

~~TRAUTMAN, WILLIAM E.~~  
~~4355 ROCKY RIDGE PLACE~~  
~~SANFORD FL 32771~~

10. Name and Address of New Registered Agent

81 Name  
Barker, Ted  
82 Street Address (P.O. Box Number is Not Acceptable)  
309 Fairway Road  
83 Sanford, FL 32773-4711  
84 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 agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Ted Barker, President of Trustees

4-21-99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ~~PTT~~ ☒ DELETE  
NAME ~~TRAUTMAN, WILLIAM E.~~  
STREET ADDRESS ~~4355 ROCKY RIDGE PLACE~~  
CITY-ST-ZIP ~~SANFORD FL 32771~~

TITLE ~~T~~ ☐ DELETE  
NAME ~~YATES, EVELENA~~  
STREET ADDRESS ~~5520 WILSON ROAD~~  
CITY-ST-ZIP ~~SANFORD FL~~

TITLE ~~VTR~~ ☐ DELETE  
NAME ~~BARKER, TED~~  
STREET ADDRESS ~~309 FAIRWAY RD~~  
CITY-ST-ZIP ~~SANFORD FL 32773~~

TITLE ~~STR~~ ☒ DELETE  
NAME ~~FARR, DAVID~~  
STREET ADDRESS ~~106 LARKWOOD DRIVE~~  
CITY-ST-ZIP ~~SANFORD FL~~

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE PTR ☒ Change ☐ Addition  
3.2 NAME Barker, Ted  
3.3 STREET ADDRESS 309 Fairway Road  
3.4 CITY-ST-ZIP Sanford, FL 32773-4711

4.1 TITLE STR ☐ Change ☒ Addition  
4.2 NAME Austin, Patricia  
4.3 STREET ADDRESS 420 Kimberly Court  
4.4 CITY-ST-ZIP Sanford, FL 32771-9717

5.1 TITLE VTR ☐ Change ☒ Addition  
5.2 NAME Owen, Jack  
5.3 STREET ADDRESS 5855 S. Sylvan Lake Drive  
5.4 CITY-ST-ZIP Sanford, FL 32771-9038

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ted Barker  
President of Trustees 4-21-99 (407) 322-2914

Date

Daytime Phone #

CR2E037-11198