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 # N06248

1. Corporation Name

FIRST BAPTIST CHURCH OF STUART, FLORIDA, INC.

Principal Place of Business

2. Principal Place of Business

Mailing Address

201 W. OCEAN BLVD. STUART FL 34994-2945 201 W. OCEAN BLVD. STUART FL 34994-2945

2a. Mailing Address

FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90177 029 ****70.00



3. Date incorporated or Qualifed

21				26					11/20/1984				
Suite, Apt. #, etc.				Suite, Apt. #, etc.				1 4	4. FEI Number			Ap	plied For
22				27				-	~59-0816435			No	t Applicable
City & State				City & State				5	5. Certifcate of Statu	s Desired		\$8.75 A Fee Re	
Zip 24	Country Zip					Country 30			5. Election Campaigr Trust Fund Contrib	•		\$5.00 Added t	
	and Address of Curr	<u>' </u>	10. Name and Address of New Registered Agent										
						81	Name				_		
TAYLOR, LARRY						82	Street Add	Address (P.O. Box Number is Not Acceptable)					
201 W. OCEAN BLVD.						02	Suggi Add	uicaa ((1 .O. DOX 140/1100/10	11017100000			
STUART FL 34994						83					-		
OTUANT FE CHOSE						84	City					85 Zip (Code
						1	·				FI	L	
office or r agent. I a	egistered age m familiar wit	ons of Sections 617.0 ent, or both, in the Starth, and accept the obline was a large of the control of the cont	te of Florid gations of	da. Such cha , Section 617	nge was auth 7.0503, Florida	onzed by	tne corperat	rporation's t	on submits this state board of directors. I h	ment for the nereby acce	pruie app	of changing its contract as re-	gistered
SIGNATURE	Signature, typed	or printed name of registered a	gent and title	if applicable.	(NOTE: Re	gistered Agen	tisignatura reguir	ired wher			DATE		
12.		OFFICERS /			•	13.			ADDITIONS/CHAN	GES TO O	FFICERS A		
пть	D				DELETE	1.1 TITLE						☐ Change	☐ Addition
NAME	BOISSY GI	LBERT				1,2 NAME							ĺ
STREET ADDRESS 5689 S.W. LAMAY DRIVE						1.3 STREET ADDRESS							
CITY-ST-ZIP	STUART FL					1.4 CITY-ST-ZIP							
TITLE	D				DELETE	2.1 TTLE						Change	☐ Addition
NAME	NEWNAM,	F	•			2.2 NAME							
STREET ADDRESS	3104 WIME	BLETON TERRACE				2.3 STREET	ADDRESS						<u></u>
CITY-ST-ZIP	PALM CITY	/·FL				2. 4 CITY-S	T-ZIP						
IIILE	D		<u> </u>		OELETE	3.1 TITLE	1					Change	☐ Addition
NAME	YOUNG, J	EFF				3.2 NAME							
STREET ADDRESS	1620 S.W.	BELGRAVE TERRA	CE			3.3 STREET	ADDRESS						
CITY-ST-ZIP	STUART F	L 34997				3.4, CITY-S	T-ZIP						
TITLE					DELETE	4.1 TITLE						Change	☐ Addition
NAME	l l					4. 2 NAME	-						
STREET ADDRESS	1					4.3 STREET	ADDRESS						
CITY-ST-ZIP						4.4 CITY-S	r-ZIP						
TILE					DELETE	5.1 TITLE						Change	☐ Addition
NAME]					5.2 NAME							
STREET ADDRESS	1					5.3 STREET	Ţ.						
CITY-ST-ZIP						5.4 CITY-S	r-ZiP				_		
TITLE					DELETE	6.1 TITLE						☐ Change	☐ Addition
NAME						6.2 NAME							
STREET ADDRESS	[6.3 STREET	ADDRESS						
CITY-ST-ZIP						6.4 CITY-S					_		
		o information cumplied	with this f	Elina doon no	t qualify for th	o overnot	on stated in	Cacti	on 110 07(2)(i) Florid	da Statutee	I further o	ortify that the i	information

. I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that it entormation 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

TEFFSKEGNETUFOHRESQUE Young SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTORY

4/19/99

561-694-390Z Daytime Phone #