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Apr 29 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N06329 (9)
1. Corporation Name
TRUSTEE CORPORATION OF THE AMELIA BAPTIST CHURCH, INC.

Principal Place of Business 14745 BELLAMY BROS DADE CITY FL 33525 US	Mailing Address 14745 BELLAMY BROS BLVD DADE CITY FL 33525 US
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3. Date Incorporated or Qualified
11/27/1984

4. FEI Number 59-2184317	Applied For Not Applicable
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2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State 22	City & State 27
Zip 23	Country 28
Country 24	Country 30

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**BREWTON, WILLIAM F
708 E MERIDIAN AVE
DADE CITY FL 33525**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CARR, WAYNE W. 8451 GILLET RD ZEPHYRHILLS FL	☐ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANDERSON, BEA 1462 BELLAMY BROS. BLVD DADE CITY FL	☒ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HOLTZOWER, ROBERTA 2096 DARBY RD. DADE CITY FL	☐ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CRAINE, CARL T. JR 8547 GILLET RD ZEPHYRHILLS FL	☐ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CRAINE, ELIZABETH 8547 GILLET RD ZEPHYRHILLS FL	☐ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SHEFFIELD, DEBBIE 3096 DARBY ROAD DADE CITY FL	☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	☐ Change ☐ Addition
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	☐ Change ☒ Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

**D Matthew McMillin
29129 Johnston Rd. Lt. 2519
Dade City FL 33523**

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.

SIGNATURE: **Carl T. Craine Jr.** **TD** **4/17/98** **(813) 9730179**

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