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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



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

DOCUMENT # N09757

1. Corporation Name

TANTON MEMORIAL BAPTIST CHURCH, INC.

Principal Place of Business

1041 BLUE ANGEL PKWY
P.O. BOX 3617
PENSACOLA FL 32506
US

Mailing Address

P.O. BOX 3617
P.O. BOX 3617
PENSACOLA FL 32506
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

30

3. Date Incorporated or Qualified

05/23/1985

4. FEI Number

59-2552190

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

KERSEY BOB
729 N 79TH AVE
909 E CERVANTES ST, SUITE A
PENSACOLA FL 32506

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

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

Bob Kersey

Bob Kersey

3-27-99

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 PD
NAME MC NEELY, WM.
STREET ADDRESS 10128 PEPPERTREE CT
CITY-ST-ZIP PENSACOLA FL 32506 ☐ DELETE

TITLE T
NAME GRAHAM, OTIS
STREET ADDRESS 3208 COPPER RIDGE CIR
CITY-ST-ZIP CANTONEMENT FL ☐ DELETE

TITLE T
NAME KERSEY, JEAN
STREET ADDRESS 729 N 79TH ST.
CITY-ST-ZIP PENSACOLA FL ☐ DELETE

TITLE S
NAME PEGGY MOORE
STREET ADDRESS 21 N EDGEWOOD CIR
CITY-ST-ZIP PENSACOLA FL 32506 ☐ DELETE

TITLE T
NAME GARY MOORE
STREET ADDRESS 21 N EDGEWOOD CIR
CITY-ST-ZIP PENSACOLA FL 32506 ☐ DELETE

TITLE Q. DEACON
NAME Bob Kersey
STREET ADDRESS 729 N 79TH AVE
CITY-ST-ZIP PENSACOLA FL 32506 ☐ DELETE

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 ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☒ Addition
6.2 NAME Chairman/Deacons
6.3 STREET ADDRESS Bob Kersey
6.4 CITY-ST-ZIP 729 N. 79th Ave
PENSACOLA FL 32506

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

3-27-99 850-455-8458
Date Daytime Phone #

CR2E037-111/98