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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N10434

1. Corporation Name

BIBLE BAPTIST CHURCH OF MANDARIN, FLORIDA, INC.

Principal Place of Business

 4211 JULINGTON CREEK RD
 JACKSONVILLE FL 32223
 US

Mailing Address

 4211 JULINGTON CREEK RD
 JACKSONVILLE FL 32223
 US


2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		07/25/1985	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-2566988	
24 Country		29 Country		30	
5. Certificate of Status Desired ☒				\$8.75 Additional Fee Required	
6. Election Campaign Financing ☐				\$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent

 PIETRYLO, ANDREW J.
 11237 STONEY POINT LANE, EAST
 JACKSONVILLE FL 32257

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	PIETRYLO, ANDREW J.	1.2 NAME	
STREET ADDRESS	11237 STONEY PT LN E	1.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	1.4 CITY-ST-ZIP	
TITLE	TD ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	ROSS, DENWOOD F	2.2 NAME	
STREET ADDRESS	1401 STARLIGHT CT	2.3 STREET ADDRESS	
CITY-ST-ZIP	FRUIT COVE FL 32259	2.4 CITY-ST-ZIP	
TITLE	SD ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	TUNNING, JACKIE L	3.2 NAME	
STREET ADDRESS	2156 FOREST HOLLOW WAY	3.3 STREET ADDRESS	
CITY-ST-ZIP	FRUIT COVE FL	3.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	DRUM, RICHARD	4.2 NAME	
STREET ADDRESS	2704 CHELSEA COVE CIR	4.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32223	4.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	JOHNSON, DAVID A.	5.2 NAME	
STREET ADDRESS	3917 ENGLISH COLONY DR N.	5.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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

 Andrew J. Pietrylo
 Andrew J. Pietrylo

05-07-99

Date

904-262-6944

Daytime Phone #

CR2E037 (1/98)