FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B, Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N11

185 SW 10TH AVE

SOUTH BAY FL

LEWIS, PAULINE

260 NW 12TH AVE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

796 (2)

FILED Mar 06 1998 8:00am Secretary of State

MT. CALVARY FIRST BAPTIST CHURCH OF SOUTH BAY, I NC.										
Principal Place of Business Malling Address							t dannını dan kındı dibili dibili dibi	ild dill dibli d	1011 01611 81011 0	TOTA DIDIY HOUR
180 SW 10TH AVE 180 SW 10TH AVE SOUTH BAY FL 33493 SOUTH BAY FL 33493							 3. Date Incorporated or Qualifie 10/29/1985 4. FEI Number 06-0212160 	d		opplied For
2. Principal P	ace of Business	2a. Mailing Address								Additional
21		26				5. Certificate of Status Desired			Additional Boulred	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				6. Election Campaign Financing		\$5.00		
22		27				Trust Fund Contribution		Added to	Fees	
City & State	9	City & State				7. Is this nonprofit corporation a			n?	
Zip	Country	28	Zip Country			-	8 7 L		□ No	
24	25	29 30					 This corporation owes or has Personal Property Tax due Ju 			tangible] No
9. Name and Address of Current Registered Agent							10. Name and Address of New			7 140
				81	Name					-
CHILDS, WILLIE MACK					Strant	Addross	(P.O. Box Number is Not Accept	habla\		
225 SW 10TH AVE				82	3110017	Auuross	(F.O. BOX NUMBER IS NOT ACCEPT	.aule)		
SOUTH BAY FL 33493										
				84	City				85 Zip (Code
			_					<u>FL</u>	_ '	
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.										s registered registered
SIGNATURE			_							
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registe 12. OFFICERS AND DIRECTORS 13				ed Age	nt signature	required w	when reinstating) ADDITIONS/CHANGES TO OFF	DATE	DIRECTOR	S IN 12
TITLE	P OFFICERS AND	DELETE	1.1.1	ITs F		T	ADDITIONS/CHANGES TO OFF	· IOCHS AND	Change	Addition
NAME	COOPER, ROOSEVELT			1.2 NAME				•		
STREET ADDRESS	660 W 37TH ST				1.3 STREET ADDRESS					
CITY-ST-ZIP	RIVIERA BEACH FL		•	1.4 CiTY - ST - ZIP						
TITLE				2.1 TITLE					Change	Addition
NAME	CHILDS, WILLIE MACK		2.21	2.2 NAME						
STREET ADDRESS			2.3 \$	2.3 STREET ADDRESS						
CITY-ST-ZIP			2.4	2. 4 CITY - ST - ZIP						
TITLE	-		3.1 T	3.1 TITLE					Change	Addition
NAME	WITCHARD, BETTY (FINAN)		3.2 N	3.2 NAME		ĺ				
STREET ADDRESS			3.3 S	3.3 STREET ADDRESS						
CITY-ST-ZIP			_	3.4. CITY-ST-ZIP		ļ <u> </u>			1 05	A dates
TITLE	-			4.1 TITLE					Change	Addition
NAME	CHILDS, LEXIE M (RCDING) 225 SW 10TH AVE		4. 2 NAME			1				ľ
ACHTH DAY FI			4.3 STREET A			1				
CITY-ST-ZIP TITLE			4.4 C		1-214	ļ <u> </u>			Change	Addition
NAME	ROKER RERTHA M		526		j]			THE PROPERTY.	

City-St-ZIP SOUTH BAY FL

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 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 abachment with an address.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE: 2 2/25/98

DELETE

CR2E037 (10/97)

Change

Addition