1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N17229

1. Corporation Name

MAIN STREET BAPTIST CHURCH OF LEESBURG, INC.

Principal Place	of Busin
1414 W. MAIN	ST.
LEESBURG FL	34748
US	

2. Principal Place of Business

Mailing Address

1414 W. MAIN ST. LEESBURG FL 34748

2a. Mailing Address



03-10-1999 90121 005 ****61.25

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3. Date Incorporated or Qualifed

40/00/4000

21		26			10/09/1900			
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.		· ·	4. FEI Number		App	lied For
22		27			- 59-1350542		Not	Applicable
City & State	•	City & State			5. Certificate of Status Desired		\$8.75 A	
23		28			3. Certificate of Status Desired		Fee Rec	uired
Zip	Country	Zip	Country	,	6. Election Campaign Financing	П	\$5.00 h	May Be
24	25	29 30			Trust Fund Contribution		Added to	Fees
	9. Name and Address of Current	Registered Agent			10. Name and Address of New	Registered	Agent	
			81	Name _T	RVING, DON -			1
SHOOP J	R, CHARLES E		82		fress (P.O. Box Number is Not Accept	able)		
1905 HEL	•		"		3 Woodlyn Drive	10.07		
	G FL 34748		83					
FFFORM	G 1 C 34/40			<u></u>				
			84		sburg	FL	85 Zip C 347	48
11 Purcuant t	to the provisions of Sections 617.0502	and 617 1508. Florida Statutes.	the abov	e-named con	poration submits this statement for the	nurpose of	changing its r	egistered
office or re	egistered agent, or both, in the State of	f Florida. Such change was auth	OUZED DA	the corporat	tion's board of directors. I hereby acce	pt the appoir	ntment as reg	istered
agent. I ar	n familiar with, and accept the obligation	ons of, Section 617.0503, Florida	a Statutes	. ,		2/20	199	
SIGNATURE	Signature, typed or printed frame of registered agent	ANOTE: Bo	oletered Ace	et eleneture requir	red when reinstating)	DATE	11/	
12.	OFFICERS AND		13.	in agriculo requi	ADDITIONS/CHANGES TO O	FICERS AN	D DIRECTOR	RS IN 12
TITLE	CD	₩ DELETE	1,1 TITLE	·	D		Change	☐ Addition
NAME	SHOOP JR, CHARLES E	•	12 NAME		BRADFORD, EVERETT			[
ł	1905 HELMS AVE			,	309 N 15th Street			1
STREET ADORESS	LEESBURG FL							
CITY-ST-ZIP	D D	₩ DELETE	1.4 CITY-S 2.1 TITLE		<u>Leesburg, FL 34748</u> D		Change	Addition
TITLE	-	E DECE IL	2.2 NAME	1	-		X	
NAME	BERGMANN, JAMES				CUPPELS, EARL			
STREET ADDRESS	211 S GLENN STREET		_		705 Nuzum Street			_
CITY-ST-ZIP	LEESBURG FL	EN DELETE	2. 4 CITY-	ST-ZIP	Fruitland Park, FL 3	34/31	Change	Addition
TITLE	ST	™ DELETÉ	3.1 TITLE	- 1	CD		A Onlingo	
NAME	GILBERT, ANNA M		3.2 NAME		IRVING, DON			
STREET ADDRESS	1201 PENN STREET		3.3 STREE	T ADDRESS	1503 Woodlyn Drive			
CITY-ST-ZIP	LEESBURG FL		3.4. CITY-	ST-ZIP	Leesburg, FL 34748			Addition
TITLE		☐ DELETE	4.1 TITLE	1			Change	LT Addition
NAME			4, 2 NAME					
STREET ADDRESS			4.3 STREE	T ADDRESS				.
CITY-ST-ZIP			4.4 CITY-5	ST-ZIP				
TTILE		☐ DELETE	5.1 TITLE	1			Change	☐ Addition
NAME			5.2 NAME					
STREET ADDRESS			53 STREE	T ADDRESS				
CITY-ST-ZIP			5.4 CITY-5	ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE				Change	Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE	TADDRESS)
OUTY OT 78D			6.4 CITY-5	ST-ZIP	• .			1

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:

SUNTATURE REQUIRED SIGNATURE AND TYPED OR PRINTED NAME OF GIGNING OFFICER ON DIRECTOR

2/20/99

Daytime Phone #

RSE037 (11/98)