FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(3)

FIRST BAPTIST CHURCH OF SWITZERI AND JINC

THIS DAFTET CHUNCH OF SWITZERLAND, INC.							
Principal Plac	e of Business	Mailing Address				- I LOURISION SON THERE INTIO READS TYPIR LINES MINIST WHICH WINES WINTER FOR THE STATE OF THE S	
1295 ROBERTS JACKSONVILLE		1295 ROBERTS RD JACKSONVILLE FL 32259				3. Date Incorporated or Qualified 12/11/1986 4. FEI Number Applied For Not Applicab 59-2874662 Not Applicab	1
2. Principal P	lace of Business	2a. Mailing Address				— 60.7F · · · ·	ᅴ
21		26				5. Certificate of Status Desired 58.75 Additional Fee Required	ĺ
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				6. Election Campaign Financing \$5.00 May Be	٦
22		27				Trust Fund Contribution	
City & State	e	City & State				7. Is this nonprofit corporation a homeowners association? ■ Yes □ No	٦
Zip	Country	Zip	Coun			8. This corporation owes or has paid the current year Intangible	٦
24	25		30			Personal Property Tax due June 30. 🚇 Yes 🔲 No	_
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered Agent	\exists
COMER	JAMES D.		Į	81 82	Name	ess (P.O. Box Number is Not Acceptable)	_
	LUTHAHATCHEE ROAD				Street Addre	ess (P.O. Box Number is Not Acceptable)	- 1
	NVILLE FL 32259			83			٦
0.101.00	7775		_	_	0''		4
				84	City	E 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 tille if epplicable. (NOTE, Registered Agent signature required when reinstating) DATE							
12.	Signature, typed or printed name or registered agent		<u> </u>	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	-
TITLE	D	DELETE	1.1 TIT	LE.		☐ Change ☐ Additio	n l
NAME	COMER, JAMES D.		1.2 NA		1	_ · _	
STREET ADDRESS	1540 BELUTHAHATCHEE RD.		1.3 STRE		ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		1,4 CITY				
TITLE	D	DELETE	2.1 TITI	_		Change Additlo	1
NAME	BRASWELL, JOHN H		2.2 NA	ME	Ì	_ • -	ĺ
STREET ADORESS	1267 SCOTT RD		2.3 STRE		ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		2. 4 CIT		i		1
TITLE	D	DELETE	3.1 TITI			Change Addition	<u> </u>
NAME	GARDNER, JOHN A.		3.2 NAI	ME			}
STREET ADDRESS	1760 GRASSINGTON WAY		3.3 STF	EET A	ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		3.4. CIT				
TITLE		DELETE	4.1 TIT	_		Change Additio	ī
NAME			4. 2 NA	ME	1		1
			4.9 CTC	neer.	ADDDEEC		1

6.4 CITY-ST-ZIP 14. I hereby certily 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 attackment with an address.

4,4 CITY - ST- ZIP

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME STREET ADDRESS

TITLE

NAME

783-5310

FILED

Feb 04 1998 8:00am

Secretary of State

Change

Addition