## 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 #

(8)

CIDET BADTIET CHILDCH OF BACDAD INC

**FILED** Apr 13 1998 8:00am Secretary of State

FIRST BAPTIST CHURCH OF BAGUAU, INC.									
Principal Place of Business		Mailing Address				- I CORRILATE EST CIRTO IRATO BILITO FARAL RIBA BIRAL REGI		i Bioli Bioli (Boi	
4529 FORSYTH ST P.O. BOX 247 BAGDAD FL 32530-0247		4529 FORSYTH ST P.O. BOX 247 BAGDAD FL 32530-0247			3. Date Incorporated or Qualified 03/10/1987 4. FEI Number		Applied For		
						59-1036027	$\neg$	Not Applicable	
2. Principal F	Place of Business	2a. Mailing Address 26				5. Certificate of Status Desired	\$8.75	5 Additional	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				6. Election Campaign Financing		Required  May Be	
22		27	27			Trust Fund Contribution		to Fees	
City & State		City & State			7. Is this nonprofit corporation a homeowners		tion?		
Zip Country		Zip Country			· · · · · · · · · · · · · · · · · · ·	No			
24	25	29	30 Count	.ry		8. This corporation owes or has paid the curr Personal Property Tax due June 30.	ent year I Yes	Intangible  No	
	9. Name and Address of Curren		1901			10. Name and Address of New Registered A			
			8	1 N	lame				
STEPHENS, GLEN			8	2 Si	treet Addres	ess (P.O. Box Number is Not Acceptable)			
	RHILL DR		8	-					
MILIUN	FL 32570								
			8	4 Ci	ity	FL	85 Zij	p Code	
11. Pursuant	to the provisions of Sections 617.050	2 and 617,1508, Florida Statut	es, the abo	ve-na	med corpo	oration submits this statement for the purpose of	L J changing	j its registered	
agent. I a	egistered agent, or both, in the state im familiar with, and accept the obligation in the state.	of Florida. Such change was a ations of, Section 617.0503, Fli	authorizea i orida Statut	by the es.	; corporation	oration submits this statement for the purpose of on's board of directors. I hereby accept the appoint the appointment of the purpose of the properties of the purpose of t	intment a	as registered	
SIGNATURE .							·		
12.	Signature, typed or printed name of registered age OFFICERS ANI		E: Registered A	gent sig	nature required	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND	DIDECTO	300 INI 10	
TITLE	Ď	DELETE	1.1 TITLE		$\overline{}$		☐ Change		
NAME	MCINNIS, HUNTER 12		1.2 NAME	E					
STREET ADDRESS	6775 VENTURA BLVD.		1.3 STRE	et addr	RESS				
CITY-ST-ZIP	MILTON FL			- ST - ZiP	,			· · · · · · · · · · · · · · · · · · ·	
TITLE	D CLENN EIELDED	<u> </u>				J	L Change	e 🔲 Addition	
NAME STREET ADDRESS	GLENN, FIELDER 3333 ROBINSON POINT ROAL	n	22 NAME		0500				
CITY-ST-ZIP	MILTON FL	U	2.3 STREE 2. 4 CHTY						
TITLE	D	☐ DELETE	3.1 TITLE		-		Change	Addition	
NAME	GUNTER, WAYNE		3.2 NAME	£				_	
STREET ADDRESS	4600 GUNTER RD		3.3 STREE	et addf	RESS				
CITY-ST-ZIP	MILTON FL .	T on ore	3.4. CITY		P				
TITLE	S SUCCESS D LOSEBUING	DELETE	4.1 TITLE		ľ	I	Change	Addition	
NAME Street address	SHEFFIELD, JOSEPHINE 150 SHEFFIELD DRIVE		4. 2 NAMI	_	~~~				
CITY-ST-ZIP	MILTON FL		4.3 STREE 4.4 City-		i i				
TITLE	IIII-1 VII I L	DELETE	5.1 TITLE		<del></del>		Change	Addition	
NAME			5.2 NAME			-		•••••••	
STREET ADDRESS			5.3 STREE		RESS				
CITY-ST-ZIP			5.4 CITY-	·ST-ZIP					
TITLE		☐ DELETE	6.1 TITLE				Change	Addition	
NAME			6.2 NAME	Ė					
STREET ADDRESS			6.3 STREE		i i				
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. 11 11 il aladad Carras