FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPÓRATIONS

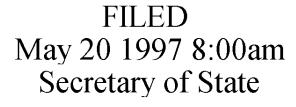
DOCUMENT #

(5)

FELLOWSHIP INDEPENDENT BAPTIST CHURCH OF QUINCY,

Principal Place of Business

Mailing Address





851 SOUTH ADA QUINCY FL 9235		651 SOUTH ADAMS STREE QUINCY FL 32351-3905	651 SOUTH ADAMS STREET QUINCY FL 32351-3905							
			-			3. Date Incorporated or Qualified 10/09/1987	3a. Date 05	of Last F /01/19	Report 96	
2. Principal P	lace of Business	2a, Mailing Address 26				4. FEI Number NOT APPLICABLE	NUMBER Applied For Not Applicable			
Suite, Apt. #, etc.		Sulte, Apt. #, etc.	27			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State		City & State	28			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip 24	Country 25	Zip 29	30 Cour	try		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
	9. Name and Address of Curr	ent Registered Agent		ن ام		10. Name and Address of New Reg	istered Ag	ent		
			· ['	Na Na	me					
418 EAS	WILLIAM F. T VIRGINIA STREET		62		eet Addr	ess (P.O. Box Number is Not Acceptabl	e)			
TALLAHA	SSEE FL 32302		: [1	53						
				34 Cit					Code	
onice or re	to the provisions of Sections 617.0: egistered agent, or both, in the Sta m familiar with, and accept the obl	ie of Florida. Such change was a	authorized	by the	ned corp corporati	oration submits this statement for the pu on's board of directors. I hereby accep	urpose of cl the appoir	nanging intraction	its registered registered	
_SIGNATURE _			:							
	Signature, typed or printed name of registered a			Agent sign	nature require	ed whon reinstaling)	DATE			
12. TITLE	PD OFFICERS A	S AND DIRECTORS 13.		r	DI	ADDITIONS/CHANGES 10 OFFICERS AND DIRECT PD X Chang				
NAME	GREEN, WILLIAM A.	€ Deterit	1.1 TITLE 1.2 NAM			=	LC:	₫ Change	Addition	
STREET ADDRESS	651 S ADAMS ST		1.3 STRFET ADDRESS			reen, William A.	_ 4_			
CITY-ST-ZIP	QUINCY FL					31 N. Calhoun Stre	et			
TITLE				2.1 10LE VD		lincy, FL 32351	X	Change	Addition	
NAME	SIMS, ERNEST			1 V		maa Williama	, .	_ Onango		
STREET ADDRESS	3213 N RIDGE RD.		2.3 STREE			James Williams P.O. Box 159 (N/A)				
CITY-ST-ZIP	TALLAHASSEE FL			Y-ST-ZIP		idway, FL 32343	, ,			
TITLE	STD	₩ DELF1E	3.1 TITL		SI		<u> </u>	Change	☐ Addition	
NAME	DAVENPORT, SANDRA		3.2 NAM	1E		lijah Stackhouse				
STREET ADDRESS	RT 6 BOX 508-D		3.\$ STR	EET ADDR		02-B Jim Lee Rd.				
CITY-ST-ZIP	QUINCY FL	Del exe		Y - ST - ZIP		llahassee, FL 323	10	-		
TITLE		☐ DELETE ,	4.1 TITL				L	Change	☐ Addition	
NAME			4. 2 NA							
STREET ADDRESS				ET ADDR	E\$S					
CITY-ST-ZIP TITLE		DELETE	4.4 CIT	- S1 - ZIP	_			Change	Addition	
NAME		<u></u>	5.2 NAN				L	7 Augusts	☐ Addition	
STREET ADDRESS				EET ADDR	203					
CITY-ST-ZIP				:E1 ADUN '-ST-ZIP	100					
TITLE		DELETE	6.1 TITL				Т	Change	Addition	
NAME			6.2 NAM				_			
STREET ADDRESS				E1 ADDR	ESS					
CITY-ST-ZIP				-S1-ZIP						
## Late to a select		(1	-			1 6				

oo nereby certity 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.