FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

(1)

FILED Mar 18 1998 8:00am Secretary of State

THE SECOND BAPTIST CHURCH OF DUCK POND, INC.								
Principal Plac	e of Busines	S		Maiting Address				a vedantet die trene stret etnie treit ledt ereit dietr eint eint biet biet biet biet ifelt
C/O RUBY B HARPER ROUTE 3 BOX 75 STARKE FL 32091				C/O RUBY B HARPER ROUTE 3 BOX 75 STARKE FL 32091				3. Date Incorporated or Qualified 12/11/1987
US			Ü	IS				4. FEI Number Applied For
2. Principal P	lace of Busin	200	24	Mailing Address				59-2873298 Not Applicable
21	acc or pasii	.000	26]				Certificate of Status Desired S8.75 Additional Fee Required
Suite, Apt. #, etc.				Suite, Apt. #, etc.				B. Election Campaign Financing \$5.00 May Be
22			27					Trust Fund Contribution Added to Fees
City & Stat	e			City & State				7. Is this nonprofit corporation a homeowners association?
Zip	Country			Zip Country			,	L Yes Z No
24	25			30				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Pos No
9. Name and Address of Current				1 1				10. Name and Address of New Registered Agent
						81	Name	1 0
	R, RUBY B					82	Street	et Address (P.O. Box Number is Not Acceptable)
	3 BOX 75							5. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
STARKE	FL 32091					83		
						84	City	FL 85 Zip Code
11. Pursuant	to the provis	ons of Sections 617.	0502 and (617.1508, Florida Sta	tutes, the	above	i e-namec	ed corporation submits this statement for the purpose of changing its registered orporation's board of directors. I hereby accept the appointment as registered
office or r agent. I a	registored ag ım familiar wi	ent, or both, in the S th, and accept the o	tate of Flor bligations o	rida. Such change wa of, Section 617.0503,	as authoriz Florida Si	zed by tatutes	/ the col s.	orporation's board of directors. I hereby accept the appointment as registered
SIGNATURE			· ·					
	Signature, typed	or printed name of registere					nt signatur	fure required when reinstating) DATE DATE
12.	D	OFFICERS	AND DIRE	DELETE	13	TITLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
NAME		ER. JAKE F.		C Direct		NAME		- Change - Fashion
STREET ADDRESS		DUNTRY ESTATES	RD.				ADDRESS	s
CITY-ST-ZIP		BURG FL				CITY-S		
TITLE	D	_	,	☐ DELETE		TITLE	C	SECRETARY A Change Addition
NAME		ig, m sandra	•		2.2	NAME	•	STARLING, M. SANDRA
STREET ADDRESS	RT 3 BC				2.3	STREET	ADDRESS	S ЛТЬВОХ 70_
CITY-ST-ZIP	STARKE	FL		D bruste		CITY-S	ST - ZIP	STARKE, FL. 32091 PRESIDENT Change Addition
TITLE NAME	_	R, RUBY B.		DELETE		NAME	ť	PRESIDENT Di Change Addition
STREET ADDRESS		3 BOX 73					ADDRESS	HARPER, RUBY B. STOBOX 75
CITY-ST-ZIP	STARKE					. CITY-S		STHOVE FL. 30001
TITLE	2	<u>- </u>		☐ DELETE		TITLE	<u> </u>	STARKE, FL. 32091 Change MAddition
NAME				•	4.3	NAME	- 1	STARLING, ROBERT M.
STREET ADDRESS					4.3	STREET	ADDRESS	s RT b BOX70
CITY-ST-ZIP				·	4.4	CITY-S	T-21P	87RR KE, FL 3209/
TITLE	• ,	•		DELETE	5.1	TITLE		Change Addition
NAME						NAME		
STREET ADDRESS							ADDRESS	S
CITY-SY-ZIP TITLE				DELETE		CITY-S	T-ZIP	☐ Change ☐ Addition
NAME				□ prreie		TITLE NAME		
STREET ADDRESS							ADDRESS	s
CITY-ST-ZIP						CITY-S		Ĭ
14. I hereby o	certify that the	e information supplie	d with this	filing does not qualif	y for the e	xemp	tion stat	ated in Section 119.07(3)(i), Florida Statutes. I further certify that the Information
officer or	director of th	e corporation or the	receiver or	trustee empowered	accurate a to execute	ına ina e this i	at my się report a	signature shall have the same legal effect as if made under oath; that I am an as required by Chapter 617, Florida Statutes; and that my name appears in
Block 12	or Block 13 it	changed, or on an a	atlachmeni	t with an address.				10 - 11 2