

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 09, 1999 8:00 am
Secretary of State

04-09-1999 90065 020 ****61.25

DOCUMENT # N25706

1. Corporation Name

FIRST CHURCH OF GOD, OF BROOKSVILLE, FLORIDA, IN
C.

Principal Place of Business

20053 YONTZ ROAD
BROOKSVILLE FL 34601

Mailing Address

20053 YONTZ ROAD
BROOKSVILLE FL 34601



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

04/01/1988

4. FEI Number

59-2359130

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

BOYETT, SHERRY L REV
20053 YONTZ RD
BROOKSVILLE FL 34601

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME BOYETT, SHERRY L REV
STREET ADDRESS 20053 YONTZ RD
CITY-ST-ZIP BROOKSVILLE FL

TITLE DS ☐ DELETE
NAME BISHOP, LORRAINE
STREET ADDRESS 12376 OLD CRYSTAL RIVER RD
CITY-ST-ZIP BROOKSVILLE FL

TITLE DT ☐ DELETE
NAME JUDITH WITHERSPOON
STREET ADDRESS 12370 OLD CRYSTAL RIVER RD
CITY-ST-ZIP BROOKSVILLE FL

TITLE D ☐ DELETE
NAME WILLIE M BALLARD
STREET ADDRESS 26343 ROLLING ACRES DR
CITY-ST-ZIP BROOKSVILLE FL 34602

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME D.S. Greiders, Betty
2.3 STREET ADDRESS 26033 Heckman Drive
2.4 CITY-ST-ZIP Brooksville, FL 34601

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME DT Joyce McQueen
3.3 STREET ADDRESS 24141 Menden Hill Rd.
3.4 CITY-ST-ZIP Brooksville, FL 34601

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rev. Sherry L. Boyett 4-7-99 (352) 796-9644

Date

Daytime Phone #

CR2E037 (41/98)