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**Mar 02, 1999 8:00 am**  
**Secretary of State**

03-02-1999 90124 023 \*\*\*\*61.25

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**NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999**



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

**DOCUMENT # N26775**

1. Corporation Name

**BREAD OF LIFE EVANGELICAL CHURCH, INC.**

Principal Place of Business

2000 NE 78TH STREET  
OCALA FL 34479  
US

Mailing Address

2000 NE 78TH STREET  
OCALA FL 34479  
US



147885 90124 23

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

3. Date incorporated or Qualified

06/03/1988

4. FEI Number

59-2925818

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

FIX, WILLIAM, L  
4260 NE 132ND PL  
ANTHONY FL 32617

10. Name and Address of New Registered Agent

81 Name

Ronald J Balzer

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

3018 NE 38<sup>th</sup> Street

83

84 City

Ocala

FL

85 Zip Code

34479

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 **Ronald J Balzer**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1/20/99

DATE

12. OFFICERS AND DIRECTORS

TITLE DT  
NAME AMAN, BEATRICE  
STREET ADDRESS 2404 NE 35TH ST  
CITY-ST-ZIP Ocala FL

☐ DELETE

TITLE DCPM  
NAME FIX, WILLIAM L  
STREET ADDRESS 4260 NE 132ND PL  
CITY-ST-ZIP ANTHONY FL

☒ DELETE

TITLE TR  
NAME ZIEGLER, FRANK  
STREET ADDRESS 4035 NE 22ND AVENUE  
CITY-ST-ZIP Ocala FL

☐ DELETE

TITLE TR  
NAME CLARK, MICHAEL  
STREET ADDRESS 2340 SW 7 AVE  
CITY-ST-ZIP Ocala FL

☐ DELETE

TITLE TR  
NAME MATTHEWS, TRACY  
STREET ADDRESS 1340 NE 54TH ST  
CITY-ST-ZIP Ocala FL 34479

☐ DELETE

TITLE TR  
NAME COLLINS, RAY  
STREET ADDRESS 9844 NE 21ST TERR  
CITY-ST-ZIP ANTHONY FL

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

DP  
Ronald J Balzer  
3018 NE 38th Street  
Ocala, FL 34479

☐ Change ☒ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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:

Ronald J Balzer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/20/99

Date

(352) 351-4858

Daytime Phone #

CR2E037 (1/98)