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Secretary of State

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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # N29784

1. Corporation Name

BIBLIA FELLOWSHIP COMMUNITY CHURCH, INC.

Principal Place of Business

300 TUCKER LN.
COCOA FL 32926

Mailing Address

300 TUCKER LN.
COCOA FL 32926



2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip Country

Zip Country

24

29

Zip Country

Zip Country

9. Name and Address of Current Registered Agent

WILLEKE, ROBERT JR.
300 TUCKER LN.
COCOA FL 32926

3. Date Incorporated or Qualified

12/19/1988

4. FEI Number

59-2964873

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

10. Name and Address of New Registered Agent

81 Name

J. DENNIS GILES

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

2533 MEADOW LANE

83

84 City

COCOA

FL

85 Zip Code

32926

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]

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

(NOTE: Registered Agent signature required when reinstating)

1/5/99
DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☒ DELETE
NAME	SANDISON, DARRELL	
STREET ADDRESS	301 BASSWOOD COURT	
CITY-ST-ZIP	COCOA FL	
TITLE	D	☒ DELETE
NAME	CASDORPH, NORMA L	
STREET ADDRESS	161 ROSEWOOD DR	
CITY-ST-ZIP	COCOA FL	
TITLE	D	☐ DELETE
NAME	ROWE, DONNA	
STREET ADDRESS	138 FOREST LAKE DR	
CITY-ST-ZIP	COCOA FL 32926	
TITLE	BOX 13	
NAME	ALSO ADD	
STREET ADDRESS	ADDITION	
CITY-ST-ZIP	TITLE - D	
TITLE	NAME - LOIS ROBERTS	
NAME	ADDRESS - 5012 FLEETWOOD PL	
STREET ADDRESS	CITY-ST - COCOA, FL. 32926	
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PDC	☐ Change ☒ Addition
1.2 NAME	RANDY ALONSO	
1.3 STREET ADDRESS	300 TUCKER LN.	
1.4 CITY-ST-ZIP	COCOA, FL. 32926	
2.1 TITLE	VD	☐ Change ☒ Addition
2.2 NAME	ROBERT WILLEKE, SR	
2.3 STREET ADDRESS	133 ROSEWOOD DRIVE	
2.4 CITY-ST-ZIP	COCOA, FL 32926	
3.1 TITLE	TD	☐ Change ☒ Addition
3.2 NAME	J. DENNIS GILES	
3.3 STREET ADDRESS	2533 MEADOW LN.	
3.4 CITY-ST-ZIP	COCOA, FL. 32926	
4.1 TITLE	S	☐ Change ☒ Addition
4.2 NAME	ESTHER WILLEKE	
4.3 STREET ADDRESS	133 ROSEWOOD DRIVE	
4.4 CITY-ST-ZIP	COCOA, FL 32926	
5.1 TITLE	D	☐ Change ☒ Addition
5.2 NAME	BOB LANOU	
5.3 STREET ADDRESS	3906 SUGARBERRY PLACE	
5.4 CITY-ST-ZIP	COCOA, FL 32926	
6.1 TITLE	D	☐ Change ☒ Addition
6.2 NAME	MILTON BUCKLEY	
6.3 STREET ADDRESS	2700 N. FRIDAY RD	
6.4 CITY-ST-ZIP	COCOA, FL 32926	

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]* (J. DENNIS GILES) DTREAS/DIR

1/5/99

407-638-4744

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)