FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT STATE

Sandra B. Moltham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # N40533

FIRST BAPTIST CHURCH OF SEVEN SPRINGS, INC.

Principal Place of Business

Mailing Address

3611 LITTLE ROAD

3611 LITTLE ROAD

## **FILED** May 07 1997 8:00am Secretary of State

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NEW PORT RICHEY FL 34655		NEW PORT RICHEY FL 34655-1813								
						3. Date incorporated or Qualified 10/24/1990	3a. Date	of Last R 02/07/19	eport 996	
2. Principal P	lace of Business	2a. Mailing Address	<b>≀a.</b> Mailing Address			4. FEI Number	.1	Aŗ	plied For	
21		26				65-0903188		No	t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State	9	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	Country	Zip	Cou	untry	<del></del>	8. This corporation has liability for in				
24	25	29	30	,		· 1	Yes 🔲		. 130.002,	
	9. Name and Address of Currer	nt Registered Agent	1551	$\Box$		10. Name and Address of New Reg	stered Ag	ent		
				81	Name					
PACE .	IR. WILLIAM H.			82	C	(DO D. N				
	TTLE ROAD					et Address (P.O. Box Number is Not Acceptable)				
	ORT RICHEY FL 34655			83						
, 142-17	pitt thorize the ottoo			_						
4				84	City		FL	85 Zip	Code	
office or r agent. I a	to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the oblig	2 and 617.1508, Florida Statu of Florida, Such change was alions of, Section 617.0503, F	ites, the all authorize lorida Stal	bove d by lutes.	-named corp the corporat	oration submits this statement for the pi ion's board of directors. I horeby accep	urpose of control the appoin	ntment as	registered	
SIGNATURE .	Signature, typed or printed name of registered age		TE: Registere	d Ager	d signature requir	ed when reinstating)	DATE	· · · · · ·	<del>-</del>	
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC			RS IN 12	
TITLE	π	XXDELETE	1.1 TI	ITLE			Ĺ	Change	Addition	
NAME	MITCHELL, ERIC J		12 N	AME	(	. )	28			
STREET ADDRESS	8041 BLUE FINCH WAY		1.3 ST	TREEL	ADDRESS	MITCHELL, ERIC	Í			
CITY-ST-ZIP	NEW PORT RICHEY FL		1.4 CI	ITY-ST	- ZIP	8041 BLUE FINC	H WAY	<u> </u>		
TITLE	TD	₩ DELETE	2.1 TI	11LE		NEW PORT RICHE	Y.FI	Change	Addition	
NAME	BRAY JR., W. LOWELL		2.2 N	AME						
STREET ADDRESS	6981 MANOR BEACH ROAD		2.3 51	IREET #	ADDRESS					
CITY-ST-ZIP	NEW PT RICHEY FL		2.40	:ITY - <u>\$</u> ]	T-ZIP					
TITLE	TD	☐ DELETE	3.1 TI	ITLE			L	Change	Addition	
NAME	WETZEL, ROBERT		3.2 N	AME						
STREET ADDRESS	4555 TIBURON DR	AIRMAN OF TRU	JS TËË	egi /	ADDRESS					
CITY-ST-ZIP	NEW PORT RICHEY FL			CITY-ST						
TITLE		☐ DELETE	4.1 TI	ITLE		GREENEEE, MARY	L	Change	Addition X	
NAME			4 2 N	IAME					^	
STREET ADDRESS			4.9 S1	TREET A	ADDRESS	6814 LASSEN AVE				
CITY-ST-ZIP			4.4 CI	ITY-SI	- ZIP	NEW PORT RICHEY				
TITLE		☐ DELETE	5.1 TI	1LE		TRUSTEE		Change	Addition	
NAME			5.2 N	AME			00		Λ	
STREET ADDRESS			5.3 S1	TREET A	ADDRESS	ANTHONY A DEMAT			İ	
CITY-ST-ZIP			5.4 CI	ITY - S1	- ZIP	9025 ARUNDALE P				
TITLE		DELETE	6.1 TI	TLE		NEW PORT RICHEY	, FL	CAMP C	O P Addition	
NAME			62N	AME						
STREET ADDRESS			6.3 \$1	TREET A	ADDRESS					
CITY - ST - ZIP			6.4 CI	11Y-\$1	- <b>ZIP</b>					
44 4 4	414 415 -4 50 11 5 1 1 1 1	1 201 11 2 600	7 ( ()			7 6 3 14 14 15 15 15 15 15 15			··	

I do 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 of Block 12 if changed, or on all attachment with an address.