FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # N41845

THE FIRST BAPTIST CHURCH OF BARTOW, FLORIDA, INC

Principal Place of Business 410 E. CHURCH ST

Mailing Address

410 E. CHURCH ST

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90153 011 ****61.25



BARTOW FL 3	J8 J U	BARTOW FL 33830							
2. Principal F	Place of Business	2a. Mailing Address				orated or Qualifed	-	<u> </u>	
21		26			01/29/19				
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			4. FEI Numbe	4. FEI Number 05-0013304			plied For
22		27			05-00 133	04			t Applicable
City & Sta	te	City & State			5. Certifcate of Status Desired			\$8.75 A	
Zip	Country	Zip Country			6. Election Campaign Financing 55				May Be
24	25 29 30		0			Contribution	_ U	Added t	•
	9. Name and Address of Curre	nt Registered Agent				Address of New I	Registered A	Agent	
i			ĺ	81 Name PTTTM	IAN, H. MAR	VTN			
SLOAN, LINTON J				82 Street Add	dress (P.O. Box Nun	ber is Not Accept	ab(e)		
410 E CH		665 S			dress (P.O. Box Nun WILSON AV	ENUE			
BARTOW	FL 33830		Ī	83				· - -	
			}	84 City				85 Zip (Code
				BARTO			FL		Code 3830
11. Pursuant office or agent. La	to the provisions of Sections 617.050 registered agent, of both, in the State am familiar with and accept the obliga	02 and 617.1508, Florida Statutes of Florida : Such change was aut ations of Section 617.8503/Florid	, the ab horized la Statu	ove-named cor by the corporat tes.	poration submits this tion's board of direct	s statement for the ors. I hereby accept	purpose of options of the appoint	changing its	registered gistered
SIGNATURE	- V. // // Wu	Mul Soffin	a	_	red when reinstating)	1001	exell	99	
12.		ND DIRECTORS	13.			CHANGES TO OF	FICERS AN	D DIRECTO	RS IN 12
TITLE	D	☐ DELETE	1.1 [1]	E	TREASURER			Change	Addition
NAME	BARBER,KENNETH D.		1.2 NA	ME	MILLER, F.	EUGENE			
STREET ADDRESS	1		1.3 STI	REET ADDRESS	1095 S BRO.		UE .		
CITY-ST-ZIP	BARTOW FL		14 CIT	Y-ST-ZIP	BARTOW FL				
TITLE	D	☐ DELETE	2.1 111		214,104 14			Change	☐ Addition
NAME	CHILES, AL, JR.		2.2 NA	AE					
STREET ADDRESS			2.3 \$74	REET ADDRESS	بو.				
CITY-ST-ZIP	BARTOW FL			Y-ST-ZIP				•	
TITLE	D	☐ DELETE	3.1 TITI					Change	☐ Addition
NAME	SLOAN, JR. F		3.2 NAJ	AE					
STREET ADDRESS			3.3 STF	REET ADDRESS					
CITY-ST-ZIP	BARTOW FL 33830		3.4. CIT	Y-ST-ZIP					
TITLE	D	☐ DELETE	4.1 TITI		· · · · ·	-, -, -,		☐ Change	Addition
NAME	SCOTT, FRANK M.		4. 2 NA	ME (ļ
STREET ADDRESS	1520 SAILPOINT DR.		4.3 STF	REET ADDRESS					1
CITY-ST-ZIP	BARTOW FL		4.4 CIT	Y-ST-ZIP					
TITLE	D	☐ DELETE	5.1 TITI					☐ Change	Addition
NAME	VILLANUEVA, LUIS		5.2 NA	Æ)					
STREET ADDRESS			5.3 STF	REET ADDRESS					
CITY-ST-ZIP	BARTOW FL		5.4 CIT	Y-ST-ZIP					
TITLE		☐ DELETE	6.1 TITU	E				Change	Addition
NAME			62 NAM	AE					
STREET ADDRESS			6.3 STF	REET ADORESS					
CDV. ST. 210			6.4 CIT	Y-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 REQUIRED