## 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 # N45386**

## BRADENTON REVIVAL TEMPLE INC.

Principal Place of Busin
721 MANATEE AVE W
Bradenton FL 34205
119

2. Principal Place of Business

Mailing Address

721 MANATEE AVE W **BRADENTON FL 34205** 

2a. Mailing Address

## FILED May 03, 1999 8:00 am § Secretary of State

05-03-1999 90103 024 \*\*\*\*61.25

7/3011 - 90103 - 24

J (†181 19118 9151 B)811 31911	<b>                                     </b>

3. Date Incorporated or Qualifed

00/26/1001

21		126			00/20/1001		
Suite, Apt.	#, etc	Suite, Apt. #, etc.			4. FEI Number	App	lied For
22		27			59-2346969	Not	Applicable
City & Stat	e	City & State			5. Certifcate of Status Desired	<b>\$8.75</b> A Fee Red	_
Zip	Country	Zip .	Count	v	6. Election Campaign Financing	\$5.00	_
24	25	29	30	•	Trust Fund Contribution	Added to	- 1
24]	9. Name and Address of Current	1 - 1	1991		10. Name and Address of New Registe	red Agent	
	J. Haine and Address of Content	regional rigent	8	Name			
			L			·	
	TERRY W.		8	2 Street	Address (P.O. Box Number is Not Acceptable)		
	ATEE AVE W.		8	3		·	
BRADENT	ON FL 34205		١				
			8	4 City		FL 85 Zip C	ode
				1			ragistared
office or r	egistered agent, or both, in the State o	f Florida. Such change was a	uthorized b	v the comp	corporation submits this statement for the purpos oration's board of directors. I hereby accept the a	ppointment as reg	istered
agent. I a	m familiar with, and accept the obligati	ons of, Section 617.0503, Flo	rida Statute	s.			
SIGNATURE							
	Signature, typed or printed name of registered agent			ent signature t	required when reinstating) DAT  ADDITIONS/CHANGES TO OFFICER:		OS IN 12
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICER	Change	Addition
TITLE	DV	<b>⊠</b> DELETE	1.1 TITLE			Change	[] Addition
NAME	MYERS, EULA S.		1.2 NAME		Parson Hallie E,		
STREET ADDRESS	5411 28TH AVE. EAST		1.3 STRE	ET ADDRESS	2908 7th Ave. W.		İ
CITY-ST-ZIP	PALMETTO FL		1.4 CITY-	ST-ZIP	Bredenton, FC. 34205		
TITLE	DPTS	. 🔲 DELETE	2.1 TITLE			Change	Addition
NAME	PARSON, TERRY W.		2.2 NAME	:			
STREET ADDRESS	2908 7TH AVE. W.		2.3 STRE	ET ADDRESS		-	
CITY-ST-ZIP	BRADENTON FL		2. 4 CITY	ST-ZIP			
TITLE	D	<b>₹</b> DELETE	3.1 TITLE		<b>D</b>	Change	☐ Addition
NAME	PIERCE, WILFRED C.		3.2 NAME		Bowmen Inez L.		
STREET ADDRESS	i		3.3 STRE	ET ADDRESS		)	
CITY-ST-ZIP	BRADENTON FL		3.4. CITY	-ST-ZIP	Bredenton, FL. 34205		
TITLE		☐ DELETE	4.1 TITLE			Change	Addition
NAME	İ		4. 2 NAM	<b>=</b>			
STREET ADDRESS			4.3 STRE	ET ADDRESS			
CITY-ST-ZIP			4,4 CITY				
TITLE		☐ DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME			5.2 NAME				ĺ
			5.3 STRE	ET ADDRESS			
STREET ADDRESS			5.4 CITY	•			
CITY-ST-ZIP		☐ DELETE	6.1 TITLE			Change	Addition
		OLCE/E	6.2 NAME			C	
NAME	}		- E	Et address			
STREET ADDRESS	1		ł				
CITY-ST-ZIP	J	this filing does not great for	6.4 CITY		d in Section 119 07/3\(ii) Florida Statutes I furthe	r cartify that the in	formation

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 informationated 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.