

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS**FILED**
Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90196 003 ****61.25

0027130

DOCUMENT # N46494

1. Corporation Name

FIRST BAPTIST CHURCH OF WEST CORAL SPRINGS, INC.

Principal Place of Business

1901 CORAL RIDGE DR
CORAL SPRINGS FL 33071

Mailing Address

1901 CORAL RIDGE DR
CORAL SPRINGS FL 33071

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

12/16/1991

4. FEI Number

65-0299652

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐**\$5.00** May Be
Added to Fees

9. Name and Address of Current Registered Agent

WHITLATCH, JAMES DR
1901 CORAL RIDGE DR
CORAL SPRINGS FL 33071

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE PT
NAME MACHADO, JOHN M
STREET ADDRESS 2725 SW 180 AVE
CITY-ST-ZIP MIRAMAR FL 33029 ☒ DELETETITLE VPT
NAME MCCLURG, TIM M
STREET ADDRESS 12338 W SAMPLE RD
CITY-ST-ZIP CORAL SPGS FL 33065 ☒ DELETETITLE ST
NAME HYLTON, RODNEY M
STREET ADDRESS 11851 NW 31 PL
CITY-ST-ZIP SUNRISE FL 33323 ☒ DELETETITLE T
NAME SEEGER, KEN M
STREET ADDRESS 2943 NW 68TH AVE
CITY-ST-ZIP MARGATE FL 33063 ☐ DELETETITLE T
NAME RAMOS, LUIS
STREET ADDRESS 6600 NW 20TH ST
CITY-ST-ZIP MARGATE FL 33063 ☐ DELETETITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD
1.2 NAME STRADER, DOUGLAS J
1.3 STREET ADDRESS 992 NW 83 DRIVE
1.4 CITY-ST-ZIP CORAL SPRINGS, FL 33071 ☒ Change ☐ Addition2.1 TITLE VD
2.2 NAME WHITLATCH, JAMES (DR.)
2.3 STREET ADDRESS 3740 NW 19 STREET
2.4 CITY-ST-ZIP COCONUT CREEK, FL 33066 ☒ Change ☐ Addition3.1 TITLE ST/T
3.2 NAME HORN, WILLIAM
3.3 STREET ADDRESS 9408 NW 38 STREET
3.4 CITY-ST-ZIP CORAL SPRINGS, FL 33065 ☒ Change ☐ Addition4.1 TITLE T
4.2 NAME MACHADO, JOHN M.
4.3 STREET ADDRESS 2725 SW 180 AVENUE
4.4 CITY-ST-ZIP MIRAMAR, FL 33029 ☒ Change ☐ Addition5.1 TITLE T
5.2 NAME LAMB, ROBERT
5.3 STREET ADDRESS 12151 NW 35 STREET
5.4 CITY-ST-ZIP SUNRISE, FL 33323 ☒ Change ☐ Addition6.1 TITLE T
6.2 NAME FUNK, BARRY
6.3 STREET ADDRESS 7602 SUNFLOWER DRIVE
6.4 CITY-ST-ZIP MARGATE, FL 33063 ☒ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Katherine Harris

Date

Daytime Phone #

1-21-99 954-345-6553

CR2E037 (11/98)