

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Apr 19, 1999 8:00 am
Secretary of State

04-19-1999 90051 041 ****61.25

DOCUMENT # N46869

1. Corporation Name

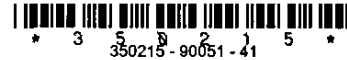
CELEBRATION BAPTIST WORSHIP CENTER, INC.

Principal Place of Business

**4406 S FLORIDA AVE
17
LAKELAND FL 33813
US**

Mailing Address

**4406 S. FLORIDA AVE.
SUITE 17
LAKELAND FL 33813
US**



2. Principal Place of Business

21 4406 S. Florida Ave.

Suite, Apt. #, etc.

22 Suite 17

City & State

23 Lakeland, Fl.

Zip

24 33813

Country

25 USA

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

3. Date Incorporated or Qualified

01/13/1992

4. FEI Number

59-3101683

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing ☐

**\$5.00 May Be
Added to Fees**

9. Name and Address of Current Registered Agent

**SMITH, TED
3127 FOREST DR
LAKELAND FL 33811**

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

Ted Smith

Ted Smith, Director

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **DP
SMITH, TED
STREET ADDRESS 3127 FOREST DR
CITY-ST-ZIP LAKELAND FL 33811**

TITLE ☐ DELETE

NAME **D
PARKER, CINDY
STREET ADDRESS 6835 LAKELAND HIGHLAND
CITY-ST-ZIP LAKELAND FL 33813**

TITLE ☐ DELETE

NAME **D
HILL, ROBERT
STREET ADDRESS 5847 COLONY PL DR
CITY-ST-ZIP LAKELAND FL 33813**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICIAL REQUIRED

Date

Daytime Phone #

4-11-99

941-428-2675 ext

3615

CR2E037 (11/98)