FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 N92000000882 (2) DOCUMENT # 1. Corporation Name

FIRST BAPTIST CHURCH OF WESLEY CHAPEL, INC.

Principal Place of Business	Mailing Addres
27137 FOAM FLOWER BLVD	27137 FOAM FLO

FILED Feb 13 1997 8:00am Secretary of State



Principal Place	lace of Business Mailing Address					, 100, 100, 100				
27137 FOAM FLOWER BLVD WESLEY CHAPEL FL 33544		27137 FOAM FLOWER BLVD WESLEY CHAPEL FL 33544-4035								
					-	3. Date Incorpora 12/21/19	ated or Qualified	3a. Date	of Last R 6/18/19	eport 6
2. Principal Pl	lace of Business	2a. Mailing Address			i	4. FEI Number	^^^		Ap	plied For
21		26			'	59-2485	882			t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of S	Status Desired Status Desired Fee Required			
City & State	9	City & State				6. Election Camp	aign Financing		\$5.00	May Be
23		28				Trust Fund Cor	ntribution		Added	o Fees
Zip 24	Country 25	Zip 29	Goun 30	try		8. This corporation Florida Statute	on has liability for its s	ntangible ta Yes 🔲		. 199.032,
	9. Name and Address of Curre	nt Registered Agent			1	10. Name and Ad	dress of New Re	latered A	jent	
			[1	81 Na	ame					
THOMAS 28731 TH	i, david Homasville Pl.		Ī	32 St	reet Address	(P.O. Box Numbe	er is Not Acceptab	le)		
	CHAPEL FL 33544		Ī	83						
			li li	94 Ci	itv				85 Zip (Code
				ı	•	····		<u> </u>		
office or re	to the provisions of Sections 617.050 egistered agent, or both, in the State	e of Florida. Such change v	vas authorized	by the	med corpora corporation	ation submits this s 's board of directo	statement for the p	urpose of c it the appoi	hanging It ntment as	s registered registered
agent I a	m familiar with, and accept the oblig	gations of, Section 617.0500	3, Florida Statu	tes.						•
SIGNATURE .	Signature, typed or printed name of registered ag	and and title if angleship	(NOTE: Registered	A a not a la	anni en rominad u	ndon rainetation)		DATE		
12.		ND DIRECTORS	13.	refler it eit	historia radinian a		ANGES TO OFFIC		DIRECTOR	IS IN 12
TITLE	D	DELETE		E	The		********		Change	Addition
NAME	MASSEY, JOHN	-3	1,2 NA	Æ	Die	psurer Per, marty 11 Lindea Joy Chapely	1	•		
STREET ADDRESS	1515 WEAVER DR.		1	EET ADDI	RESS 287	11 Linder	hurst D	n		
CITY-ST-ZIP	LUTZ FL			Y-ST-ZIF	اکسان	lay Chapeli	F 3354	4		
DITLE	D	☐ DELETE				J		[Change	Addition
NAME	TROTTER, VESTAL		2.2 NA	ΛE						
STREET ADDRESS	135 MANDARIN AVE		2.3 STR	EET ADD	RESS					
CITY-ST-ZIP	ZEPHYRHILLS FL		2. 4 CIT	Y-ST-21	P					
TITLE	D	DELETE	3.1 TITL	.E					Change	Addition
NAME	THOMAS, DAVID		3.2 NA	ME		•		•		
STREET ADDRESS	28731 THOMASVILLE PLACE		3.3 STR	EET ADD	RESS					
CITY-ST-ZIP	WESLEY CHAPEL FL		3.4. CIT	Y-ST-ZI	Р				·	
TITLE		☐ DELETE	4.1 1111	.E			:		Change	Addition
NAME			4. 2 NA	ME	Ì					
STREET ADDRESS			4.3 STF	EET ADDI	RESS		, .			
CITY - ST - ZIP				Y-ST-Zif	P					
TITLE		☐ DELETE	5.1 TITE	LE				. [Change	Addition
NAME			5.2 NA	ME .						
STREET ADDRESS			5.3 STF	EET ADD	RESS					
CITY - ST - ZIP				Y-ST-ZIF	P				:	l de con
TITLE		☐ DELETE						ı	Change	Addition
NAME			6.2 NAJ	ME						
STREET ADDRESS			6.3 STF	EET ADD	RESS					
CITY-ST-ZIP	<u> </u>	****	6.4 CIT	Y-\$1-ZII	P	A	(b. Fredda Orek de			11. i

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 peport 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 copyoration or the receiver or truefee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 16 if changed, or on an attachment with an address.

SIGNATURE