02-17-1999 90019 050 ****61.25

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9300000382

 Corporation 	NITY BIBLE CHURCH OF		Э.					
Principal Place of Business Mailing Address								
1959 MARTIN LUTHER KING SARASOTA FL 34234 US		COMMUNITY BIBLE CHURCH P O BOX 285 SARASOTA FL 34230 US						
	ace of Business	2a. Mailing Address	2a. Mailing Address			3. Date Incorporated or Qualifed 01/28/1993		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					oplied For ot Applicable	
City & State		City & State		5. Certifcate of Status Desired	\$8.75 A	Additional equired		
Zip	Country 25	Zip 29 3	Count	ry	Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	May Be to Fees	
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Reg	istered Agent		
BUTLER, REV ROSA 2155 N ORANGE AVE SARASOTA FL 34234				Name Street A	ddress (P.O. Box Number is Not Acceptable			
11. Pursuant office or ragent, I a	to the provisions of Sections 617.05 egistered agent, or both, in the State m familiar with, and accept the oblig	H DUILEK	, the abo horized to la Statut		orporation submits this statement for the puration's board of directors: I hereby accept the	FL -	code registered	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	RS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE	<u> </u>	200	☐ Change	☐ Addition	
NAME STREET ADORESS	THOMAS, JERALENE 2410 MAPLE AVE			EET ADDRESS			4 1 1 1	
CITY-ST-ZIP	SARASOTA FL 34234	- Delete	1.4 CITY		3	☐ Change	Addition	
TITLE NAME	D Butler, Rosa Rev	☐ DELETE	2.1 TITU 2.2 NAM		_~	□ Change	Addition	
STREET ADDRESS	2155 N. ORANGE AVE.		2.3 STRI	EET ADDRESS			,]	
CITY-ST-ZIP	SARASOTA FL 34234		_	/-ST-ZIP	·			
TITLE	D	☐ DELETE	3.1 TITL	E	:	Change	☐ Addition	
NAME:	REESE, EFFIE		3.2 NAM				ſ	
STREET ADDRESS	1351 16TH STREET		3.3 STRI	EET ADDRESS				
CITY-ST-ZIP	SARASOTA FL 34236		_	/-ST-ZIP			[] Addition	
TITLE	P	☐ DELETE	4.1 TITU			☐ Change	☐ Addition	
NAME	HANNANS, ELOUISE		4. 2 NAN				40	
STREET ADDRESS	1585 22ND ST		1	EET ADDRESS				
CITY-ST-ZIP	SARASOTA FL 34234		4.4 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.

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

DELETE

☐ DELETE

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12 / 99 - 941 - 365344 - Dayline Phone #

. Change

Change

☐ Addition

Addition

CR2E037 (11/98)