FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1998

2. Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9300001444 (9)

CRESTVIEW WOODLAWN BAPTIST CHURCH, INC

Principal Place of Business

824 N FERDON BLVD
CRESTVIEW FL 32536

Mailing Address

824 N FERDON BLVD
CRESTVIEW FL 32536

2a. Mailing Address

FILED Jan 22 1998 8:00am Secretary of State

Applied For

\$8.75 Additional

Not Applicable

3. Date incorporated or Qualified

03/29/1993

59-1107562

5. Certificate of Status Desired

4. FEI Number

~1		E0					rean	redanéa
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.				Election Campaign Financing Trust Fund Contribution	\$5.00	
	City & State City & State				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
23 28				7. Is this nonprofit corporation a homeowners association?				
Zip	Country	Zip	Col	intry		8. This corporation owes or has paid the	current year In	itangible
24	25	29	30			Personal Property Tax due June 30.		Ži Ņo i
Name and Address of Current Registered Agent						10. Name and Address of New Register	ed Agent	
				81 Nam	€	•		
JOY, BILLY				82 Street Address (P.O. Box Number is Not Acceptable)				
15 WOODLAWN DR				305 Seattle Slew Ct.				
CRESTMEW FL 32536				83				
				94 Cin.			[n=1 7'-	Q
				84 City		F	L 85 Zig	Code 2539
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 little if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS A		
TITLE	D	☐ DELETE	1.1 Ta	TLE	ŀ		L Change	Addition
NAME	BLOCKER, OLIN		1.2 N	AME				
STREET ADDRESS	1109 E CHESTNUT		1.3 \$	REET ADDRESS	.]			
CITY-ST-ZIP	CRESTVIEW FL		1.4 CI	TY-ST-ZIP				
TITLE	D	☑ DELETE 2.1 TI		TLE	D		Change	★ Addition
NAME	SMITH, HOLLIS		2.2 N	ME	1	im D. Barfield		ĺ
STREET ADDRESS	1409 GRANDVIEW TERRACE		2.3 S	REET ADDRESS		44 Woodlawn Dr		
CITY-ST-ZIP	CRESTVIEW FL		2.40	ITY-ST-ZIP	C ₃	restview, FL 32536		. أ
TITLE	Ď	X DELETE	3,1 TI	fLE	Д.		Change	X Addition
NAME	GORDON, BRADY		3.2 N	ME	Do	on Hagler		ŀ
STREET ADDRESS	1224 PINEWOOD LN		3.3 \$1	REET ADDRESS		012 Oak Hill Rd.		
CITY-ST-ZIP	Crestview FL		3.4. C	ITY-ST-ZIP	Cı	restview, FL 32536		
TITLE		DELETE	4.1 TC	ÎLE			Change	Addition
NAME			4. 2 N	AME				
STREET ADDRESS			4.3 \$1	REET ADDRESS				
CITY-ST-ZIP			4.4 CI	TY-ST-ZIP	1			
TITLE	111111111111111111111111111111111111111	☐ DELETE	5.1 Ti	LE	1		Change	Addition
NAME			5.2 N	ME				
STREET ADDRESS			5.3 ST	REET ADDRESS				
CITY-ST-ZIP			5.4 CI	TY-ST-ZIP				
TITLE		DELETE	6.1 TI				Change	Addition
NAME			6.2 NA	ME				
STREET ADDRESS			6.3 ST	REET ADDRESS				ĺ
CITY-ST-ZIP				TY-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								

indicated on this annual report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oain; 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.

SIGNATURE:

SIGNATURE REQUIRED Office

1-6-98