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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999 DOCUMENT # N9400006359

1. Corporation Name

FIRST BAPTIST CHURCH OF WASHINGTON PARK, INC.

Principal Place of Busines
411 GREEN STREET
WASHINGTON PARK
MOORE HAVEN FL 33471
118

Mailing Address

POST OFFICE BOX 245 MOORE HAVEN FL 33471

US

FILED Mar 03, 1999 8:00 am § Secretary of State

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2. Principal Place of Business 3. Date Incorporated or Qualified 12/29/1994 Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 3. Date incorporated or Qualified 12/29/1994 Applied For 6. Fell Number 6. Election Campaign Financing 2. Sp. 75 Additional Fee Required 3. Not Applicable 3. Size Country 3. Suite, Apt. #, etc. 3. Size Country 3. Country 3. Country 4. Fit Number 5. Certificate of Status Desired 3. Size Country 5. Country 5. Country 6. Election Campaign Financing 7. Sp. 70 May Be Adde to Fees 7. Name and Address of New Registered Agent 7. Name 7. Name and Address of New Registered Agent 7. Name 7
Suite, Apt. #, etc.
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28 Scriffcate of Status Desired Fee Required
Zip Country Zip Country Zip Country 30 S. 0.0 May Be Added to Fees P. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent WATKINS, JOHN J ESQ.
9. Name and Address of Current Registered Agent WATKINS, JOHN J ESQ. 150 S. MAIN ST. LABELLE FL ### City FL ### City FL ### Signature, typed or printed name of registered agent and ette if applicable. Signature, typed or printed name of registered agent and ette if applicable. NoTE: Registered Agent signature required when reimstating) DATE
WATKINS, JOHN J ESO. 150 S. MAIN ST. LABELLE FL 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 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, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD CAMMON, ELIJAH STREET ADDRESS TTT-LEE-ST 273 Huggins AVE N.W. STREET ADDRESS TTT-LEE-ST 273 Huggins AVE N.W. IACITY-ST-ZIP MOORE HAVEN FL 33471 TITLE VD MAKE HAYNES, JAMES
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TITLE D NAME THOMAS, CLARENCE deceased STREET ADDRESS CITY-ST-ZIP MOORE HAVEN FL 33471 THOMAS, CLARENCE deceased 6.1 TITLE 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP MOORE HAVEN, FL 33471

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 or Block 14 or Block 15 or Block 15 or Block 15 or Block 15 or Block 16 or Block 16 or Block 16 or Block 17 or Block 18 or Block 1

SIGNATURE: KEV E (STALA CLAPATA STALUIREL

2-7-49 /1-948-946 3174
Date Daytime Phone #

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