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NONPROFIT CORPORATION ANNUAL REPORT

1997



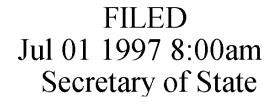
FLORIDA DEPARTMENT OF STATE

Sandra B. Mòrtham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9500001518 (8)

UNION MISSIONARY BAPTIST CHURCH OF PORT RICHEY, INC.





Principal Plac	e of Business	Mailing Address		<u> </u>	
6235 PINEHILL PORT RICHEY		6235 PINEHILL ROAD PORT RICHEY FL 34688	1-8737		
				3. Date Incorporated or Qualifie 03/28/1995	3a. Date of Last Report 07/17/1996
2. Principal P	lace of Business	2s. Mailing Address		4. FEI Number	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	hand below.	5. Certificate of Status Desired	\$8.75 Additional
City & Stat	Δ	City & State			Fee Required
23	0	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country		or intangible tax under s. 199.032,
24	9. Name and Address of Cur	29		Florida Statutes 10. Name and Address of New I	
1970 SI CLEARY	N, JAKIE DULE RD NATER FL 34619 to the provisions of Sections 617.4 registered agent, or both, in the Si im familiar with, and accept the ob	0502 and 617.1508, Florida Stat ale of Florida. Such change wa oligations of, Section 617.0503,	83 /9 84 City	To Sow le Royal Acception of the Royal Acception Sow le Royal Acception submits this statement for the strongs board of directors. I hereby acception is board of directors.	FL 85 Zip Code
SIGNATURE .	Signature, typod or printed name of registered	agent and like If applicable (N	OTE: Registered Agent signature requ	lired when minstating)	DATE
12.		AND DIRECTORS	13.		ICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		Change Additio
NAME	WHEATON, CHARLES E		1.2 NAME		
STREET ADDRESS	9520 TOWANDA LANE PORT RICHEY FL 34668		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	D D	☐ DELETE	1.4 CITY-ST-ZIP 2 1 TITLE		Change Addition
NAME	GADSON, JAKIE	-	2.2 NAME		_ , _
STREET ADDRESS	529 LINCOLN AVE.		2.3 STREET ADDRESS		
CITY-ST-ZIP	TARPON SPRINGS FL 346		2.4 CITY-ST-ZIP		
TITLE	0	DELETE	3.1 TITLE		Change Addition
IAME	HARRIS, E.C.		3.2 NAME		
TOTET ADDOLGG	U HOOK DAKLEAF INGVE		2.2 CTOSET ADDDCCC		
	8225 OAKLEAF DRIVE PORT RICHEY FL 34668		3.3 STREET ADDRESS		
DITY-ST-ZIP	PORT RICHEY FL 34668	DELETE	3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE		☐ Change ☐ Addition
CITY-ST-ZIP		☐ DELETE	3.4 CITY-ST-ZIP		☐ Change ☐ Addition
DITY-ST-ZIP TITLE NAME		☐ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		☐ Change ☐ Addition
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I do hereby certify that the information supplied with this filling 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 chapted, or on an attachment with an address.