## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9500002951 (0)

DARLINGTON OAK GROVE BAPTIST CHURCH, INCORPORATE

D					
Principal Place of Business		Mailing Address			T CODINGO SIO SOLO SUNI DOUN DELLA CONTRODINI DONO TORA DUIDI NICO 1000
1717 OAK GROVE ROAD WESTVILLE FL 32484 US		1717 OAK GROVE ROAD WESTVILLE FL 32464 US			3. Date Incorporated or Qualified 06/21/1995
					4. FEI Number Applied For S9-2093642 Not Applicable
2. Principal Place of Business 2		2a. Mailing Address	2a, Mailing Address		5. Certificate of Status Desired S8.75 Additional
21		26 Suite Act # etc		<del></del>	Fee Required
Suite, Apt. #, etc.		Suite, Apt. #, etc.			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
City & State		City & State			7. Is this nonprofit corporation a homeowners association?
23		28			☐ Yes ☐ No
Zip 24			Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24 25 29 30 9. Name and Address of Current Registered Agent			101	<del></del>	10. Name and Address of New Registered Agent
			81	Name	
GILLMAN, FRED			82	Street Add	dress (P.O. Box Number is Not Acceptable)
2014 COOK ROAD Westville FL 32464			83		
TIES I VIL	LE FL J2404				
			84	City	FL   S   Zip Code
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 agont, 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 age	ant and tillo it applicable (NOTE: I	Registered App	nt signature real	uired when reinstating) DATE
12.		D DIRECTORS	13.	in argustore radi	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	Ď.	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	ALFORD, STEVE		1.2 NAME		
STREET ADDRESS	191 OAK GROVE ROAD		1.3 STREET	ADDRESS	
CITY-ST-ZIP	WESTVILLE FL	DELETE	1.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE	GILLMAN, FRED	T DECEIE	2.1 TITLE 2.2 NAME		Change Li Adulton
NAME Street address	2914 COOK RD		2.2 NAME 2.3 STREET ADORESS		
CITY-ST-ZIP	WESTVILLE FL		2.3 STREET ADORESS 2.4 CITY-ST-ZIP		
TITLE	D	DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	DAVIS, H. B		3.2 NAME		
STREET ADORESS	1917 CO. HWY. 183 S		3.3 STREET	ADDRESS	
CITY-ST-ZIP	<b>DEFUNIAK SPRINGS FL</b>		3.4. CITY - S	T-ZIP	
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	MCDUFFIE, DANNY W		4. 2 NAME		
STREET ADDRESS	RE 2 BOX 49		4.3 STREET	ľ	•
CITY-ST-ZIP	SAMSON AL	DELETE	4.4 CITY-S	r-zip	☐ Change ☐ Addition
TITLE	HOLLOWAY, DALE D	L''I DETEIL	5.1 TITLE	1	广 cuanãe □ vodinoi
NAME Street adoress	671 MIMS RD		5.2 NAME 5.3 STREET	ADDRESS	
CITY-ST-ZIP	DEFINITION OF THE STATE OF THE		5.4 CITY-S1		
TITLE	AMI ALIBERT ALIBERT F	DELETE	6.1 TITLE	. 411	☐ Change ☐ Addition
NAME			6.2 NAME	1	<u>_</u>
STREET ADDRESS			6.3 STREET	ADDRESS	

I hereby certify that the information experied 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.

6.4 CITY-ST-ZIP

SIGNATURE:

1 20.98

**FILED** 

May 12 1998 8:00am

Secretary of State