## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # N9600001126 (9)

## TRINITY FREE WILL BAPTIST CHURCH OF LAKELAND INC

	THE WELL ON HOT ON							
Principal Place of Business Mailing Address								
430 LONGFELLOW BLVD. 9240 MOORE RD. LAKELAND FL 33801 LAKELAND FL 33809						3. Date Incorporated or Qualified 02/28/1996		
						4. FEI Number 59-3245408	Applied For Not Applicable	
2. Principal Place of Business 2s. Mailing Ac 21 26			<u> </u>			+ 5. Certricate of Status Desired LI + -	3.75 Additional Fee Required	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					.00 May Be ided to Fees	
City & State		City & State				7. Is this nonprofit corporation a homeowners association?		
Zip 24	Country 25	Zip 29	Coun <b>30</b>	try		8. This corporation owes or has paid the current yes Personal Property Tax due June 30.		
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent		
			8	H N	ame		:	
TUCKER, TROY				82 Street Address (P.O. Box Number is Not Acceptable)				
9240 MOORE RD. LAKELAND FL 33809				13				
				14 C	ty	FL 85	Zip Code	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the ab							ging its registered	
- Affice or re	to the provisions of Sections 617,050 agistered agent, or both, in the State in familiar with, and accept the oblig	of Florida Such change was at	いけいへいけんべ	nu m	corporation	on's board of directors. I hereby accept the appointment	ent as registered	
SIGNATURE _	Signature, typed or printed name of registored agr	ent and titte it applicable. (NOTE	: Realstered	Agent si	nature require	d when reinstating) DATE	<del></del>	
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRE	CTORS IN 12	
TITLE	DT	DELETE	1.1 TITL	E	0		Addition	
NAME	TUCKER, TROY		1.2 NAM	1.2 NAME 3/		LIE FAIRLESS 10 W ARIANA ST LOTT 222		
STREET ADDRESS	ss 9240 MOORE RD. 1.3		1.3 STR	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP LAKELAND FL. 33803				
CITY-ST-ZIP	LAKELAND FL 33809		1.4 CITY	-ST-ZI	LA			
TITLE	D	☐ DELETE	21 TITL	E	1	□ c	hange 🔲 Addition	
NAME	BETHUNE, ROY		2.2 NAN	IE	- 1			
STREET ADDRESS	1944 SPARKMAN RD.		2.3 STR	EET ADO	RESS			
CITY-ST-ZIP	PLANT CITY FL 33566	1100,000	2. 4 CIT		P	· · · · · · · · · · · · · · · · · · ·	hange	
TITLE	D	DELETE	3.1 TITL		1		Hands T Wondon	
NAME	JONES, CECIL		3.2 NAN					
STREET ADDRESS	1110 N. RUTH AVE.		3.3 STR			•		
CITY-ST-ZIP	LAKELAND FL 33805	DELETE	3.4. CIT 4.1 TITL		P		hange	
TITLE		☐ néreie						
NAME			4. 2 NA					
STREET ADDRESS				EET ADD				
CiTY-ST-ZIP		DELETE	4.4 CM 5.1 TITL		·	Пе	hange Addition	
TITLE			5.1 HZ			_ ~		

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.

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE: July & SUATEBE TROP TRAVERER 1-8-98 (41) 858-690;

DELETE

CR2E037 (10/97)

Change

**FILED** 

Jan 22 1998 8:00am

Secretary of State