

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
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DOCUMENT # **N97000001041 (9)**

1. Corporation Name

**FAITH TEMPLE MISSIONARY BAPTIST CHURCH, INC. OF
TAMPA, FLORIDA**

Principal Place of Business

Mailing Address

602 E. PALM AVE.
TAMPA FL 33602

602 E. PALM AVE.
TAMPA FL 33602

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

02/25/1997

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

10. Name and Address of New Registered Agent

ROBINSON, GREGORY B
602 E. PALM AVE.
TAMPA FL 33602

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

300002675073--4

83

-10/28/98--01088--024

84 City

*****61.25 *****61.25

FL

85 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 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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	ROBINSON, GREGORY B	
STREET ADDRESS	602 E. PALM AVE.	
CITY-ST-ZIP	TAMPA FL 33602	

TITLE	D	<input type="checkbox"/> DELETE
NAME	O'BANNER, JESSIE	
STREET ADDRESS	2704 N. BLVD.	
CITY-ST-ZIP	TAMPA FL 33602	

TITLE	S	<input type="checkbox"/> DELETE
NAME	ALLEN, ERIC SR.	
STREET ADDRESS	6312 N. 22ND ST.	
CITY-ST-ZIP	TAMPA FL 33610	

TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	EPPE, THOMAS	
STREET ADDRESS	3009 N. 46TH ST.	
CITY-ST-ZIP	TAMPA FL 33605	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	

2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	

3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	

4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	NELSON NORMA
4.3 STREET ADDRESS	2926 PINE ST
4.4 CITY-ST-ZIP	TAMPA, FL 33602

5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	

6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-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 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

02/19/1997

Date

Daytime Phone #

CR2E037 (10/97)