SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT 1**9**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # N9700005448 (2)

REGENCY BAPTIST CHURCH, INC.

NEGENOT BAFTIST CHUNCH, INC.				
Principal Place of Business Mailing Address				1 (44)(12) 313 1211) 166/1 66/11 66/11 66/11 66/11 66/11 66/11 66/11 66/11
8123-5 PHOGE PORT RICHER		8123-3-RIDGE ROAD PORT RICHEY FL 34688		3. Date Incorporated or Qualified  09/23/1997  4. FEI Number  Applied For
2. Principal P	lace of Business  MASHINGTON	2a. Malling Address 28 P.O. Box 995	 5	5. Certificate of Status Desired \$8.75 Additional Fee Required
Sulte, Apt.			·	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
	RICHEY, FL	City & State 28 PORT RICHEY		7. Is this nonprofit corporation a homeowners association?
Zip 24 346		zip 29 .34-673 3	Country  PASCO	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
81 Nama				10. Name and Address of New Registered Agent
BRITTAIN, FRED 8123-5 RIDGE ROAD PORT RICHEY FL 34668			82 Street	HARLAN WEBBER Address (P.O. Box Number is Not Acceptable) 7230 Bim INI DRIVE
				PORT RICHEY , FL 85 Zip Code 34668
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	HARLAN WEBB Bigneture, typed or printed name of registered agent a	ER	Harlen	Webber 7-15-98 e required when reinstating) DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	Change Addition
NAME	BRITTAIN, FRED	•	1.2 NAME	HARLAN WEBBER
STREET ADDRESS	12839 HONEYBROOK DR.		1.3 STREET ADDRESS	7230 BIMINI DRIVE PORT RICHEY, FL 34668
CITY-ST-ZIP	HUDSON FL 34689		1.4 CITY-ST-ZIP	PORT RICHEY, FL 34668
TITLE	D.	DELETE	2.1 TITLE	Change Addition
NAME	KIRVES, RON		2.2 NAME	
STREET ADDRESS	1\$537 SUMMERWOOD DR.		2.3 STREET ADDRESS	
CITY-ST-ZIP	BAYONET POINT FL 34667		2.4 CITY-ST-ZIP	
TITLE	D	X DELETE	3.1 TITLE	Change Addition
NAME	BRITTAIN, JANICE		3.2 NAME	HOLLY SURELS
STREET ADDRESS	12839 HONEYBROOK DR.		3.3 STREET ADDRESS	4407 BADEN DAIVE
CITY-ST-ZIP	HUDSON FL 34669		3.4 CITY-ST-ZIP	HQ10AY, FL 34691
TITLE	D	DELETE	4.1 TITLE	Change Addition
NAME	KIRVES, BEVERLY		4.2 NAME	
STREET ADDRESS	1\$537 SUMMERWOOD DR.		4.3 STREET ADDRESS	
CITY-ST-ZIP	BAYONET POINT FL 34667		4.4 CITY-ST-ZIP 5.1 TITLE	
TITLE	D D	DELETE		Change Addition
NAME	CORBITT, RAYMOND		5.2 NAME	
STREET ADDRESS	10525 MOSQUERO DR.		5.3 STREET ADDRESS	

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 suppliemental 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.

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

<u>Pört richey fl 34668</u>

10525 MOSQUERO DR.

CORBITT, BELLE

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

HARLAN WEBBER

DELETE

(813) 841-7204

\_\_\_ Change

Addition

**FILED** 

Jul 30 1998 8:00am

Secretary of State