

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

99 DEC 13 PM 12:56

DOCUMENT # N97000005732

1. Corporation Name

Springfield Christian Center, Inc.

Principal Place of Business

Mailing Address

Springfield Road Rt. 1 Box 138  
Lloyd, Fla. Monticello, Fla.  
32344

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. Zip

Country

29. Zip

Country

3. Date Incorporated or Qualified

10/10/1997

4. FEI Number

59-3518943

Applied For  
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Earl Baggett  
Rt. 1 Box 165-A  
Monticello, Fla. 32344

81. Name

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

83. City

84. City

FL

85. Zip Code

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

1.1 TITLE CD

1.2 NAME Larry Casey

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE VCD

2.2 NAME Earl Baggett

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE PD

3.2 NAME Joe Masley

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

7.1 TITLE

7.2 NAME

7.3 STREET ADDRESS

7.4 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE CD

1.2 NAME Earl Baggett

1.3 STREET ADDRESS Rt. 1 Box 165-A

1.4 CITY-ST-ZIP Monticello, Fla. 32344

2.1 TITLE VCD

2.2 NAME James McSpadden

2.3 STREET ADDRESS 11675 Rocky Branch Rd.

2.4 CITY-ST-ZIP Monticello, Fla. 32344

3.1 TITLE PD

3.2 NAME No one Added

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE TD

4.2 NAME Evelyn H Buzbee

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE SD

5.2 NAME Berlene Cooksey

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

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, with all other like empowered.

SIGNATURE: Evelyn H. Buzbee

12/11/99

AD

Daytime Phone #

CR2E037 (11/98)

Fla. Dept of State  
Division of Corporations

Dear Sir:

I did not receive the reject letter date 6/7/99 that was sent to Rt. 3 Box 138, Monticello, Fla. 32344. I have filed at another annual report with changes. Thank you for all your help.

Sincerely

Evelyn H. Beylee  
Treasurer  
Springfield Christian Center Inc.