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

**NONPROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # N9800000667

1. Corporation Name

ANCHOR BAPTIST CHURCH, INC.

Principal Place of Business

Mailing Address

11255 W. ATLANTIC BLVD..#207 CORAL SPRINGS FL 33071

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## FILED Apr 22, 1999 8:00 am § Secretary of State

04-22-1999 90223 025 \*\*\*\*61.25



2. Principal P	lace of Business	2a. Mailing Address		3. Date Incorporated or Qualifed
21 77	80 WILES RD	26 164 NW	80 AUE	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		4. FEI Number Applied For
22	<u> </u>	27		. 65-0811290 Not Applicable
City & Stat		City & State	- FL	5. Certificate of Status Desired See Required
23 CORA	· <del>-                                   </del>	28 MARGATE	<u> </u>	
	Gountry	<sup>Zip</sup> 33063	Country BROWAG	6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent
	9. Name and Address of Current	registerea Agent	81 Name	
				RICK NAIL
NAIL, RICK			82 Street	Address (P.O. Box Number is Not Acceptable)
	ATLANTIC BLVD.,#207		83 .	· · · · · · · · · · · · · · · · · · ·
CORAL SPRINGS FL 33071				164 NW 80 AVE
			84 City	MARGATE FL 85 ZID Code 3
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	Auch The	RICK NAIL	gistered Agent signature re	Y/20/99 DATE
12.	Signature typed or printed name of registered agent a OFFICERS AND		gistered Agent signature re	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	T · ·	DELETE	1.1 TITLE	T Change ☐ Addition
NAME	KISER, EDWIN M	~	1.2 NAME	TOHO VAROIS
	0.0 DOV 0707		1.3 STREET ADDRESS	11651 ROYAL PALM BLVD. #203
STREET ADDRESS	CORAL SPRINGS 33 07597-87		1.4 CITY-ST-ZIP	COLAL SPRINGS FL 33065
CITY-ST-ZIP	T .	DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	MONAHAN, MARK	<b>X</b>	2.2 NAME	ROLAND RITTER
	2911 NW 106 STREET		2.3 STREET ADDRESS	11523 NW 36 ST
STREET ADDRESS	CORAL SPRINGS FL 33065		2.4 CITY-ST-ZIP	CORAL SPRINGS FL 33065
CITY-ST-ZIP	T	DELETE	3.1 TITLE	T X Change Addition
NAME	ZUKOWSKI, PATRICIA H	Γ`	3.2 NAME	KEN PORTER
STREET ADDRESS	44044 5884 6 DONE		3.3 STREET ADORESS	11020 NW 43 CT.
CITY-ST-ZIP	CORAL SPRINGS FL 33071		3.4. CITY-ST-ZIP	CORAL SPRINGS FL 33065
TITLE	COLUMN OF THE COURT	☐ DELETE	4.1 TITLE	Change Addition
NAME	, '	_	4, 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	,
CITY-ST-ZIP	·		4.4 CITY-ST-ZIP	
TITLE		DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	,
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP		,	5,4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	Change Addition
NAME		_	6.2 NAME	
STREET ADDRESS	E-96-800 - 1000 4		6.3 STREET ADDRESS	·
מול די אחוי	PORTON POR		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: