

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
Mar 03, 1999 8:00 am
Secretary of State

03-03-1999 90070 003 ****61.25

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1. Corporation Name

MT. ARARAT MISSIONARY BAPTIST CHURCH, INC.

Principal Place of Business

2503 N. MYRTLE AVE.
JACKSONVILLE FL 32209

Mailing Address

2503 N. MYRTLE AVE.
JACKSONVILLE FL 32209



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

02/20/1998

4. FEI Number

59-1058974

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

9. Name and Address of Current Registered Agent

LATTIMORE, DAVID A JR.
794 CAMERON DR.
ORANGE PARK FL 32073

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

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 DELETE

NAME BLACK, LIZZIE
STREET ADDRESS 5518 MAHALIA DR.
CITY-ST-ZIP JACKSONVILLE FL 32209

TITLE D DELETE

NAME BRACY, JARVIS
STREET ADDRESS 8268 CREEK HOLLOW CT.
CITY-ST-ZIP JACKSONVILLE FL 32244

TITLE D DELETE

NAME BRYANT, BOAZ
STREET ADDRESS 4250 CARROLL DR.
CITY-ST-ZIP JACKSONVILLE FL 32209

TITLE D DELETE

NAME CHATMAN, RUTH
STREET ADDRESS 3622 GRUNTHAL ST.
CITY-ST-ZIP JACKSONVILLE FL 32209

TITLE D DELETE

NAME FULLER, BETTY
STREET ADDRESS 141 W. 26TH ST.
CITY-ST-ZIP JACKSONVILLE FL 32206

TITLE D DELETE

NAME FENNEY, SHIRLEY
STREET ADDRESS 2644 WYLENE ST.
CITY-ST-ZIP JACKSONVILLE FL 32209

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
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

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

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:

Shirley Fenney

1/24/99

Date

Daytime Phone #

CR2E037 (1/198)