

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 728330

**Entity Name:** NORTHSIDE BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

1700 N FRANKLIN ST.  
PLANT CITY, FL 33563

**Current Mailing Address:**

1700 N FRANKLIN ST.  
PLANT CITY, FL 33563 US

**FEI Number: 59-1495080**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

CREEL, AUSTIN L  
3337 SILVERMOON DRIVE  
PLANT CITY, FL 33566 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           SMITH, W.A.  
Address        2702 W. SR 60  
City-State-Zip: PLANT CITY FL 33567

Title           DEACON  
Name           JAMESON, MICHAEL  
Address        8420 EDISON RD  
City-State-Zip: LITHIA FL 33547

Title           TRUSTEE  
Name           READ, MELYNDA  
Address        4114 EL SHADDIAI SQUARE  
City-State-Zip: PLANT CITY FL 33565

Title           TRUSTEE  
Name           HARRIS, JESSE  
Address        2206 PARKVIEW DRIVE  
City-State-Zip: PLANT CITY FL 33563

Title           PASTOR  
Name           SEXTON, HAL  
Address        708 W. DIXIE STREET  
City-State-Zip: PLANT CITY FL 33563

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: HAL D. SEXTON**

**PASTOR**

**04/18/2018**

Electronic Signature of Signing Officer/Director Detail

Date