


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 20, 2006 8:00 am
Secretary of State

04-20-2006 90203 004 ****61.25

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|---|--|--|--|---|--|
| DOCUMENT # 700304 | | | |  | |
| 1. Entity Name EAST ORLANDO BAPTIST CHURCH HOLDING COMPANY, INC. | | | | | |
| Principal Place of Business 8287 CURRYFORD ROAD ORLANDO FL 32822 | | Mailing Address 8287 CURRYFORD ROAD ORLANDO FL 32822 | | | |
| 2. Principal Place of Business | | 3. Mailing Address | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | |
| City & State | | City & State | | 4. FEI Number 70-0304581 | |
| Zip | | Country | | Applied For Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | 8.75 Additional Fee Required | | | |
| 6. Name and Address of Current Registered Agent SAULSBURY, GERALDINE C 1634 STEVENS AVE ORLANDO FL 32806 | | | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 32822 | | |
| 8. 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. I am familiar with, and accept the obligations of registered agent. | | | | | |
| SIGNATURE <i>Geraldine C. Saulsbury</i> | | SIGNATURE <i>Geraldine C. Saulsbury</i> | | DATE 3/31/06 | |
| FILE NOW: FEE IS \$61.25 Due By May 1, 2006 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | | \$5.00 May Be Added to Fees | |
| | | | | Make Check Payable to Florida Department of State | |
| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T REPOLLET, JOSE DEACON 1820 PROCTOR AVE ORLANDO FL 32817 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T BOESCH, CHARLIE 12040 GRAY BIRCH CIRCLE ORLANDO FL 32822 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T WALTER, JESSE 19301 PALMVIEW ST ORLANDO FL 32833 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T GARY, WILLIAM 9906 SURREY RIDGE RD ORLANDO FL 32825 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D LAWRENCE, DONNELL, Deacon 14226 SAHALEE LN ORLANDO FL 32828 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Geraldine C. Saulsbury* 3/31/06 407-225-7225