

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 19, 2005 8:00 am
Secretary of State

04-19-2005 90389 004 ****61.25

DOCUMENT # 701365 1. Entity Name TERRY ROAD BAPTIST CHURCH, INC.	
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Principal Place of Business 6625 TERRY RD JACKSONVILLE FL 32216	Mailing Address 6625 TERRY RD JACKSONVILLE FL 32216
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip	Country



1st MOORE CR2E037 (10/04)

4. FEI Number 59-1762284	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BARNES, BETTY 2138 LARRY DR WEST JACKSONVILLE FL 32216	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT NICHOLS, PHIL 26 BECKWITH ST. JACKSONVILLE FL 32216 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/T W. E. Turner 8858 MacArthur Ct S Jacksonville, FL 32216 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST JOHN HURST 1125 17TH ST N JACKSONVILLE BCH FL 32250 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/T Bernard D. Carter 2760 Chelton RD Jacksonville, FL 32216 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WEEKS, RONALD W JR. 7174 RIDGEGLN CT. JACKSONVILLE FL 32216 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BARNES, BETTY 2138 LARRY DR. WEST JACKSONVILLE FL 32216 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	 ☐ Change ☐ Addition

12. 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 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: *Betty Barnes*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/4/2005

904-733-4250

Date

Daytime Phone #