


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2005 8:00 am
Secretary of State

01-28-2005 90034 040 ****61.25

DOCUMENT # 704293 1. Entity Name FIRST BAPTIST CHURCH OF MICANOPY INC	
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Principal Place of Business 709 NE CHOLOKKA BLVD BOX 241 MICANOPY, FL 32667	Mailing Address 709 NE CHOLOKKA BLVD BOX 241 MICANOPY, FL 32667
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.	4. FEI Number 59-2164233
City & State	City & State	Applied For <input type="checkbox"/> Not Applicable
Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required

01142005 Chg-NP CR2E037 (10/03)

6. Name and Address of Current Registered Agent

**WEAVER, MARTHA A
702 SEMINARY ST/PO BOX 171
MICANOPY, FL 32667**

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 Martha A Weaver DATE 1-24-05
Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when retreating)

Filing Fee is \$61.25 Due by May 1, 2005	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
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10. OFFICERS AND DIRECTORS

<input type="checkbox"/>	D	BURNHAM, JANIE	<input type="checkbox"/> Delete
		17404 COUNTY RD 234 MICANOPY, FL 32667	
<input type="checkbox"/>	VD	MORGAN, MITCHELL B.	<input type="checkbox"/> Delete
		RT 2 BOX 147 W MORGAN RD MICANOPY, FL	
<input type="checkbox"/>	STD	WEAVER, MARTHA A	<input type="checkbox"/> Delete
		702 NW SEMINARY AVE MICANOPY, FL 00000.	
<input type="checkbox"/>	PD	ROBERTS, FAYE	<input type="checkbox"/> Delete
		309 WHITING RD MICANOPY, FL 00000.	
<input type="checkbox"/>	D	WARD, RONALD	<input type="checkbox"/> Delete
		102 NE RALLY AVE MICANOPY, FL 32667	
<input type="checkbox"/>			<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

<input type="checkbox"/>	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		STREET ADDRESS	
		CITY-STATE-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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: Martha A Weaver MARTHA A. Weaver W= 352 466 3121
H= 352 466 3247