

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747233

FILED  
Apr 19, 2006  
Secretary of State

Entity Name: ALPHA BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

5235 SW 82ND AVE.  
DAVIE, FL 333285201

**New Principal Place of Business:**

**Current Mailing Address:**

6301 FILLMORE STREET  
HOLLYWOOD, FL 33024

**New Mailing Address:**

FEI Number: 59-2368121

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BUTTON, RALPH E  
1801 N.W. 98TH AVENUE  
PEMBROKE PINES, FL 33024 US

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

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

**OFFICERS AND DIRECTORS:**

Title: SD ( ) Delete  
Name: KOUTSODONTIS, BILL  
Address: 1414 NW 63RD AVE  
City-St-Zip: HOLLYWOOD, FL 33024

Title: PD ( ) Delete  
Name: BUTTON, RALPH  
Address: 1801 NW 98TH AVE  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: TD ( ) Delete  
Name: SNIDER, JAMES F  
Address: 3081 SW 54TH AVE  
City-St-Zip: FT LAUDERDALE, FL 33314

Title: D ( ) Delete  
Name: KISER, CHARLES  
Address: 3299 SW 50TH ROAD  
City-St-Zip: FT. LAUDERDALE, FL 33314

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Change (X) Addition  
Name: ALBRITTON, WAYNE  
Address: 13551 NW 6TH STREET; UNIT 205  
City-St-Zip: PEMBROKE PINES, FL 33028

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RALPH E. BUTTON

PD

04/19/2006

Electronic Signature of Signing Officer or Director

Date