

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90179 028 ****70.00

DOCUMENT # 756052	
1. Entity Name THE WEST COAST BAPTIST ASSOCIATION, INC.	

Principal Place of Business 1010 W. OLIVE ST. LAKELAND, FL 33802-5053	Mailing Address P. O. BOX 8053 (MAIL ADDRESS) LAKELAND, FL 33802-5053
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50044673



2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address 5200 HORTON ROAD Suite, Apt. #, etc.
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04192005 Chg-NP CR2E037 (10/03)

City & State PLANT CITY, FLORIDA	4. FEI Number 59-2889170	Applied For ☐ Not Applicable
Zip 33567	Country	5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MILLS, LARRY G REV 5200 WEST SOUTH STREET ORLANDO, FL 32811		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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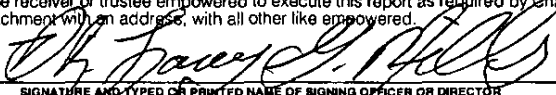
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:  DATE: **4/21/05**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing 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	DP MILLS, LARRY G REV 5200 WEST SOUTH ST. ORLANDO, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BRYANT, EMMA VERONICA 5200 HORTON ROAD PLANT CITY, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DAILEY, JOHNNIE REV 1680 18TH STREET SARASOTA, FL 33580 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JOHNSON, OSCAR REV. 9813 MORRIS GLEN WAY TEMPLE TERRACE, FLORIDA 33637 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD TURNER, REV. BRAGG L. 1800 18TH AVENUE SOUTH ST. PETERSBURG, FL ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD EVANS, JOHN REV. 5833 CALAIS LANE ST. PETERSBURG, FLORIDA 33714 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MILLER, PATRICK 1680 18TH ST SARASOTA, FL 33580 ☐ 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:  DATE: **4/21/05** DAYTIME PHONE: **(813) 737-3887**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR