

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2005 08:00 AM
Secretary of State

DOCUMENT # 758930

1. Entity Name
FORT WHITE BAPTIST CHURCH, INC.



Principal Place of Business
**P.O. BOX 187
FORT WHITE, FL 32038 US**

Mailing Address
**P.O. BOX 187
FORT WHITE, FL 32038 US**



01062005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2890901

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**WENONAH, DENCE
1092 SW CENTRAL TERRACE
FORT WHITE, FL 32038**

**DO NOT WRITE
IN THIS SPACE**

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

Wenonah Dence

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-9-05

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	DTR
NAME	DENCE, WILLIAM R
STREET ADDRESS	1092 SW CENTRAL TERR
CITY-ST-ZIP	FORT WHITE, FL 32038
TITLE	DT
NAME	FLOYD, EDWARD
STREET ADDRESS	COR OF CR 18 & MEMORIAL DRIVE
CITY-ST-ZIP	FT WHITE, FL
TITLE	SD
NAME	DENCE, WENONAH J
STREET ADDRESS	1092 SW CENTRAL TERR
CITY-ST-ZIP	FORT WHITE, FL 32038
TITLE	T
NAME	MARTIN, MARGARET
STREET ADDRESS	SW STILLMAN AVE
CITY-ST-ZIP	FORT WHITE, FL 32038
TITLE	DT
NAME	REVELS, JANICE
STREET ADDRESS	CABOOSE RD
CITY-ST-ZIP	FT WHITE, FL
TITLE	DTR
NAME	EDWARDS, WILBUR
STREET ADDRESS	COR OF N BRYANT & E WALES STREET
CITY-ST-ZIP	FT. WHITE, FL

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01/13/05-80023-022 70.00

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IN THIS SPACE**

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:

Wenonah Dence

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-9-05

Date

Daytime Phone #