

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 09, 2006 08:00 AM
Secretary of State

DOCUMENT # N02000002550	
1. Entity Name BURNING BUSH EVANGELISTIC ASSOCIATION INC.	

Principal Place of Business 728 NW 7TH AVE. GAINESVILLE FL 32601	Mailing Address PO BOX 264 GAINESVILLE FL 32603
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E037 (10/05)

4. FEI Number 04-3740637	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent RAWLS, CORNELIA 728 NW 7TH AVE. GAINESVILLE FL 32601
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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 _____ (Signature typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when consenting) **DATE** _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2006	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	D ☐ Delete	TITLE	☐ Change ☐ Add
NAME	VENSON, JENNIFER	NAME	1100000460776
STREET ADDRESS	728 NW 7TH AVE.	STREET ADDRESS	03/20/06-80023-025 70.00
CITY-ST-ZIP	GAINESVILLE FL 32601	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Add
NAME	KING, LORETTA	NAME	
STREET ADDRESS	728 NW 7TH AVE.	STREET ADDRESS	
CITY-ST-ZIP	GAINESVILLE FL 32601	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Add
NAME	GRIFFIN, CLARA	NAME	
STREET ADDRESS	728 NW 7TH AVE.	STREET ADDRESS	
CITY-ST-ZIP	GAINESVILLE FL 32601	CITY-ST-ZIP	
TITLE	P ☐ Delete	TITLE	☐ Change ☐ Add
NAME	RAWLS, CORNELIA	NAME	
STREET ADDRESS	728 NW 7TH AVE.	STREET ADDRESS	
CITY-ST-ZIP	GAINESVILLE FL 32601	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Add
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Add
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 _____ **3/15/06** **352-273-6277**