2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED May 02, 2005 08:00 AM Secretary of State

ANNUAL REPORT				Secretary of State		
DOCU	MENT # N03000010			Secreta	ly of State	
1. Entity Nar	^{ne} KOREAN BAPTIST CHURCH					
GLORI	KOKEAN BAPTIOT CHUKCH	, 1140.				
Principal Plac	ce of Business	Mailing Address				
798 NORTH CRESTVIEW,	PEARL STREET	798 NORTH PEARL STREET CRESTVIEW, FL 32536				
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I.	OO NOT WRITE	IN 1715 SPAC		4. FEI Numbe		Applied For
				20-047	N	\$8.75 Additional
		Name of the same o		5. Ceruncate	of Status Desired	Fee Required
	6. Name and Address of Current Ro	gistered Agent		. •		·
CHUNG,			DO	NOT WRIT	ΓE	
798 NORTH PEARL STREET CRESTVIEW, FL 32536			IN THIS SPACE			
				11/4 1	I TIIS SPAC	<u>,</u> E
				·		
the above the obliga	e named entity submits this statement for t tions of registered agent.	he purpose of changing its registered	d office or register	ed agent, or bot	h, in the State of Florida. 1	am familiar with, and accept
SIGNATURE	Simo y	Open		4	120/05	
- GIGHTI GIAC	Signature, typed or privated name of registored agent and	title if applicable. (NOTE: Registered.	Agent signature required	when reinstating)	OA*	TE.
	Filing Fee is \$61.25 Due by May 1, 2005	Election Campaign Financ Trust Fund Contribution.	· — +	00 May Be ed to Fees		
10.	OFFICERS AND D	RECTORS		l		No. of the second secon
TILE	D					
NAME STREET ADDRESS	CHUNG, SIMON Y 798 NORTH PEARL STREET					
CITY-ST-ZIP	CRESTVIEW, FL 32536			•.	U0000035	
TITLE NAME	D CONTRACT IN A			•	ຄວາມ. ເຄວ-ຊຸດ	163-022 8.75
STREET ADDRESS	SPENCE, KIM 5346 KENTUCKY STREET	·			The second secon	and the second s
CITY-ST-ZIP	CRESTVIEW, FL 32539				U0000035	9625 163-023 61.25
title Name	D PARRISH, SOK SIM				new Marina men	المالية المالي المالية المالية المالي
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CITY-ST-ZIP	CRESTVIEW, FL 32539			the end of the the tree	NOT WRI	gray to the contract of the contract
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STREET ADDRESS				•		
CATY-ST-ZIP			No. of the control of		ing and a supplemental property of the supplemental suppl	رئ چهد مده ساد د
	1					
NAME						

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 trustree 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:

CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS

SIGNATURE AND TYPED ON PRINTED HAME OF SIGNING OFFICER ON DIRECTOR

5/28 / 25 758-748