

**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 27, 2004 8:00 am
Secretary of State

04-02-2004 90060 036 ****70.00

DOCUMENT # N13795

1. Entity Name
FAITH BAPTIST CHURCH OF BRANDON, INC.



Principal Place of Business
**1118 N. PARSONS AVE
BRANDON, FL 33510 US**

Mailing Address
**1118 N. PARSONS AVE
BRANDON, FL 33511 US**

66415868



DO NOT WRITE IN THIS SPACE

01122004 No Chg-NP CR2E037 (10/03)

4. FEI Number
59-3122077 Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**REYNOLDS, HENRY E.
1118 N. PARSONS AVE
BRANDON, FL 33510**

**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

Henry E Reynolds

(NOTE: Registered Agent signature required when reinstating)

3-29-04

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	WATERS, MARK
STREET ADDRESS	4807 LYNN OAKS CIR
CITY-ST-ZIP	DOVER, FL 33527
TITLE	D
NAME	NOETTL, DAN
STREET ADDRESS	4719 BLOOMINGDALE AVE.
CITY-ST-ZIP	VALRICO, FL 33594
TITLE	D
NAME	STWAN, JERRY
STREET ADDRESS	1103 S TAYLOR RD
CITY-ST-ZIP	SEFFNER, FL 33584
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
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:

Henry E Reynolds

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-19-04

DATE

813-654-0836

DAYTIME PHONE #