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

Mar 16, 2004 8:00 am **Secretary of State** DOCUMENT # N34810 03-16-2004 90026 012 ****61.25 BLACK POND BAPTIST CHURCH, INC. Principal Place of Business Mailing Address 3644 OLD JENNINGS RD 3644 OLD JENNINGS RD 14000000 MIDDLEBURG, FL 32068 HS US MIDDLEBURG, FL 32068 2. Principal Place of Business 3. Mailing Address Suite, Apt, #, etc. Suite, Apt. #, etc. 03022004 Cha-NP CR2E037 (10/03) City & State City & State 4. FEI Number 59-1903774 Applied For Not Applicable Zip Country Country Zio \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required -- - 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WALSINGHAM, DONALD 4007 MUSTANG RD Street Address (P.O. Box Number is Not Acceptable) MIDDLEBURG, FL 32068 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 Fiorida. I am familiar with, and accept the obligations of registered agent, SIGNATURE Signature, lyped or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 'DATE Ī.,; 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Make check payable to Trust Fund Contribution. Florida Department of State Due by May 1, 2004 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE K Delete TITLE ☐ Change ★ Addition SILCOX, EW NAME NAME WATERS, ROGER, SR. STREET ADDRESS 1333 STARLING RD STREET ADDRESS 4509 ALLABOARD DR, MIDDLEBURG FL MIDDLEBURG, FL 32068 CITY-ST-7IP CITY_ST_7IP DT TITLE Delete TITLE ☐ Change X Addition NAME WALSINGHAM, DONALD E WOOD, BRUCE STREET ADDRESS 4007 MUSTANG RD STREET ADDRESS 4620 HEDGEHOG ST CITY-ST-ZIP MIDDLEBURG, FL 32068 CITY-ST-ZIP MIDDLEBURG FL 32068 DC Delete X Change TITLE TITLE ☐ Addition NAME CONAWAY, JIM NAME Conaway, Jim STREET ADDRESS -5642-MAVERICK-RD-STREET ADDRESS CITY-ST-ZIP MIDDLEBURG, FL 33068 CITE ST ZIP same address ППΕ ☐ Delete ☐ Change ☐ Addition STARLING, JUNIOR NAMÉ NAME STREET ADDRESS 512 BRANSCOMB ROAD STREET ADDRESS CITY-ST-ZIP MIDDLEBURG, FL 32068 CITY-ST-ZIP TITLE ☐ Defete TITLE Change ☐ Addition NAME GREEN, MARK NAME 2789 BLACK CREEK DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIDDLEBURG, FL 32068 CITY-ST-ZIP ☐ Addition TITLE Delete ППЕ ☐ Change LIVINGSTON, JAMES NAME NAME STREET ADORESS 999 OAK LANE STREET ADDRESS ORANGE PARK, FL 32065 CITY-ST-ZIP 12. Thereby 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.

Land Lon Don LAME OF BURNING OFFICER OR DIREC

Donald E. WALSINGHAM 3-10-04

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