

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2006 8:00 am
Secretary of State

01-25-2006 90026 050 ****61.25

DOCUMENT # N94000000565

1. Entity Name
**NEW ORANGE BAPTIST CHURCH OF WASHINGTON
COUNTY, INC.**



Principal Place of Business
**782 ALFORD RD
CHIPLEY, FL 32428 US**

Mailing Address
**P.O. BOX 46
CHIPLEY, FL 32428 US**

40005951



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01232006 Chg-NP CR2E037 (11/05)

4. FEI Number
59-2756198

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**HAYES, ROYSTER F
804 HAYES LANE
CHIPLEY, FL 32428**

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 reinstating)

DATE

**Filing 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**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CDTR
HAYES, ROYSTER F
804 HAYES LANE
CHIPLEY, FL 32428** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
LEE, RUTH
1826 GAINER RD
CHIPLEY, FL 32428** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DTR
HOLLEY, BRYANT
2346 WALNUT CIRCLE
CHIPLEY, FL 32428** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
HOLLEY, LINDA J
2346 WALNUT CIRCLE
CHIPLEY, FL 32428** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
Mary L. Hanley
867 Frasier Cr
Chipley, FL 32428** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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:

Mary L. Hanley **Mary L. Hanley**

1-24-06

Date

Daytime Phone #