## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N95000003777

Entity Name: NEW BIRTH BAPTIST CHURCH OF PENSACOLA, INC.

FILED Jun 30, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1610 NORTH "Q" STREET **1610 NORTH** PENSACOLA, FL 32505 PENSACOLA, FL 32505 **Current Mailing Address: New Mailing Address:** 1610 NORTH "Q" STREET **1610 NORTH** PENSACOLA, FL 32505 PENSACOLA, FL 32505 FEI Number: 59-2587249 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BROWN, CHARLES 7218 RAMPART WAY PENSACOLA, FL 32505 US 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. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BERTHA, STANLEY Name: Name: Address: 1610 N Address: City-St-Zip: PENSACOLA, FL 32505 City-St-Zip: Title: () Delete Title: () Change () Addition Name: BROWN, CHARLES Name: Address: 7218 RAMPART WAY Address: City-St-Zip: PENSACOLA, FL 32505 City-St-Zip: Title: () Delete Title: () Change () Addition PEACOCK, ERIC Name: Name: 208 N GARFIELD Address: Address: City-St-Zip: PENSACOLA, FL 32505 City-St-Zip: Title: ( ) Delete Title: () Change () Addition FINDLEY, WALTER Name: Name: 3101W FISHER ST Address: Address: City-St-Zip: PENSACOLA, FL 32505 City-St-Zip: Title: () Delete Title: () Change () Addition MCCANTS, JOHN Name: Name: 220 W CHASE ST APT #102B Address: Address: City-St-Zip: PENSACOLA, FL 32502 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition BROWN, JOHNNY BLACK, JIMMIE Name: Name: Address: 1610 N Address: 1610 N PENSACOLA, FL 32505 PENSACOLA, FL 32505 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES BROWN D 06/30/2004