

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000623

FILED
Apr 27, 2006
Secretary of State

Entity Name: BEARING CROSS BAPTIST CHURCH, INC.

Current Principal Place of Business:

8800 N. NINTH AVE
PENSACOLA, FL

New Principal Place of Business:

P. O. BOX 3366
PENSACOLA, FL 32516

Current Mailing Address:

P.O. BOX 3366
PENSACOLA, FL 32516

New Mailing Address:

FEI Number: 59-3541774

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOWELL, ROBERT M
8800 N. NINTH AVE
PENSACOLA, FL US

Name and Address of New Registered Agent:

HOWELL, ROBERT M
7604 HARVEY STREET
PENSACOLA, FL 32506 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:

04/27/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HOWELL, ROBERT M
Address: 7604 HARVEY STREET
City-St-Zip: PENSACOLA, FL 32506

Title: D () Delete
Name: WILLIAMSON, DAVID
Address: 544 ROYCE ST
City-St-Zip: PENSACOLA, FL 32503

Title: D () Delete
Name: LASSETER, GLENN
Address: 3538 DELOACH ST
City-St-Zip: PENSACOLA, FL 32514

Title: D () Delete
Name: HAIGLER, JOE
Address: 6257 CONFEDERATE DR.
City-St-Zip: PENSACOLA, FL 32514

Title: D () Delete
Name: LOLLAR, BILL
Address: 7606 HARVET ST
City-St-Zip: PENSACOLA, FL 32506

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HOWELL, ROBERT M
Address: 7604 HARVEY STREET
City-St-Zip: PENSACOLA, FL 32506

Title: T (X) Change () Addition
Name: WILLIAMSON, DAVID
Address: 3036 TURNER'S MEADOW ROAD
City-St-Zip: PENSACOLA, FL 32514

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: ROBERT M. HOWELL

P

04/27/2006

Electronic Signature of Signing Officer or Director

Date