2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2006 8:00 am
Secretary of State

03-20-2006 90019 035 ****61.25

DOCUMENT # N05000005659

1. Entity Name
FIRST BAPTIST CHURCH OF CAMPBELLTON, INC.

Principal Place of Business
2405 E HWY 2
CAMPBELLTON, FL 32426

Mailing Address
2405 E HWY 2
CAMPBELLTON, FL 32426

03172006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number ☐ Applied For ☒ Not Applicable

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

6. Name and Address of Current Registered Agent

PUMPHREY, LUTHER
2405 E HWY 2
CAMPBELLTON, FL 32426

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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	T ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	TOOLE; CLEATUS	NAME	
STREET ADDRESS	5385 COTTON ST	STREET ADDRESS	
CITY-ST-ZIP	GRACEVILLE, FL 32440	CITY-ST-ZIP	
TITLE	TV ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	NORSWORTHY, L.G.	NAME	
STREET ADDRESS	2356 HWY 2 BOX 84	STREET ADDRESS	
CITY-ST-ZIP	CAMPBELLTON, FL 32426	CITY-ST-ZIP	
TITLE	T ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	OLLIG, RACHEL	NAME	
STREET ADDRESS	2388 HWY 2	STREET ADDRESS	
CITY-ST-ZIP	CAMPBELLTON, FL 32426	CITY-ST-ZIP	
TITLE	P ☐ Delete	TITLE	☐ Change ☒ Addition
NAME	PUMPHREY, LUTHER	NAME	
STREET ADDRESS	2946 MADISON ST	STREET ADDRESS	
CITY-ST-ZIP	MARIANNA, FL	CITY-ST-ZIP	32446
TITLE	ST ☐ Delete	TITLE	☐ Change ☒ Addition
NAME	HARDY, MAVIS	NAME	
STREET ADDRESS	5254 HWY 231	STREET ADDRESS	
CITY-ST-ZIP	CAMPBELLTON, FL	CITY-ST-ZIP	32426
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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: Mavis T. Hardy March 18, 2006 (850)263-9820
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #