

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000000505

**FILED**  
**Feb 19, 2015**  
**Secretary of State**  
**CC8522887509**

**Entity Name:** NORTHWEST COAST BAPTIST ASSOCIATION, INC.

**Current Principal Place of Business:**

2335 INDUSTRIAL DR.  
PANAMA CITY, FL 32405

**Current Mailing Address:**

2335 INDUSTRIAL DR.  
PANAMA CITY, FL 32405

**FEI Number:** 59-1420777

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

VARNUM, TROY REV  
2335 INDUSTRIAL DRIVE  
PANAMA CITY, FL 32405 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

**Officer/Director Detail :**

Title M  
Name SANDERS, DOUG  
Address P.O. BOX 349  
City-State-Zip: FOUNTAIN FL 32438

Title VM  
Name ROCHEFORT, JOHN  
Address 5008 E. 14TH STREET  
City-State-Zip: PANAMA CITY FL 32404

Title T  
Name DANIEL, TOM  
Address 1005 OHIO AVENUE  
City-State-Zip: PANAMA CITY FL 32444

Title H  
Name HODGES, JE  
Address 1917 POSTON DR  
City-State-Zip: PANAMA CITY FL 32404

*I hereby 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 all other like empowered.*

**SIGNATURE:** TOM DANIEL

**OFFICER**

**02/19/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date