

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2005 8:00 am
Secretary of State

01-26-2005 90022 030 ****70.00

DOCUMENT # 702333

1. Entity Name
**BEE RIDGE BAPTIST CHURCH INCORPORATED, OF
SARASOTA, FLORIDA**



Principal Place of Business
**4210 PROCTOR ROAD
SARASOTA, FL 34233-2223**

Mailing Address
**4210 PROCTOR ROAD
SARASOTA, FL 34233-2223**

50006670



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01102005

Chg-NP

CR2E037 (10/03)

City & State

City & State

4. FEI Number

59-0991182

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PETERS, CHARLES
620 SIMMONS AVE.
SARASOTA, FL 34232**

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

Charles Peters

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Jan 16-05

**Filing Fee is \$61.25
Due by May 1, 2005**

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
NAME
STREET ADDRESS
CITY - ST - ZIP
DP
PETERS, CHARLES
620 SIMMONS AVE
SARASOTA, FL 34232 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
SD
HARRELL, HUESTON R
2519 SHERIDAN DR
SARASOTA, FL 00000, ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
J. D. STOKES
5347 Woodvale Dr
Sarasota FL 34232 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VD
BLANTON, THOMAS D
5741 FORRESTON PINE COURT
SARASOTA, FL 34243 ☐ Delete

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

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12. I hereby certify that the information supplied with this filing does not qualify 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 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:

Charles Peters

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Jan 16-05