

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Jul 19, 2007 08:00 AM  
Secretary of State

DOCUMENT # 702450

1. Entity Name

CENTRAL BAPTIST CHURCH INC



Principal Place of Business

4235 MT. STERLING AVE.  
TITUSVILLE FL 32780

Mailing Address

4235 MT. STERLING AVE.  
TITUSVILLE FL 32780



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1382766

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

2nd MOORE

CR2E037 (4/07)

6. Name and Address of Current Registered Agent

COX, DAVID J  
4235 MT. STERLING AVE  
TITUSVILLE FL 32780

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

FILE NOW: FEE IS \$61.25  
Due By September 5, 2007

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

TITLE PD  
NAME COX, DAVID J  
STREET ADDRESS 4255 MT STERLING AVE  
CITY-ST-ZIP TITUSVILLE FL 32780 ☐ Delete

TITLE VPD  
NAME SHAFFER, RUSSELL  
STREET ADDRESS 4235 MT. STERLING AVENUE  
CITY-ST-ZIP TITUSVILLE FL 32780 ☐ Delete

TITLE ST  
NAME SUMNER, LLOYD  
STREET ADDRESS 480 RANEY RD  
CITY-ST-ZIP TITUSVILLE FL 32780 ☐ Delete

TITLE O  
NAME MURROW, HUGH  
STREET ADDRESS 3342 SW HOGANNAH LANE  
CITY-ST-ZIP OKEECHOBEE FL 34974 ☐ Delete

TITLE O  
NAME VITEILARO, JACK  
STREET ADDRESS 4235 MT STULAND AVE  
CITY-ST-ZIP TITUSVILLE FL 32780 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition  
000000769618  
07/19/07-80009-008 61.25

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

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

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CITY-ST-ZIP ☐ Change ☐ Addition

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

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:

*David J. Cox*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 7/14/07 Daytime Phone #