


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 12, 2005 8:00 am
Secretary of State

04-12-2005 90130 018 ****61.25

DOCUMENT # 703177

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



Principal Place of Business Mailing Address

**123 SOUTH SEMINOLE AVENUE
 INVERNESS FL 34452-4735
 US**

**123 SOUTH SEMINOLE AVENUE
 INVERNESS FL 34452-4735
 US**

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

59-1265586 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required



1st MOORE CR2E037 (10/04)

6. Name and Address of Current Registered Agent

**KELLEY, ARTHUR L
 6608 S DUVAL ISLAND DR.
 FLORAL CITY FL 34436**

7. Name and Address of New Registered Agent

Name **JOHN CORDWELL**

Street Address (P.O. Box Number is Not Acceptable) **4926 N. Cottonwood Pt**

City **Hernando** FL Zip Code **34442**

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]* **JOHN CORDWELL** **4-8-05**

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 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

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	KELLEY, ARTHUR	
STREET ADDRESS	6608 S DUVAL ISLAND DR.	
CITY-ST-ZIP	FLORAL CITY FL 34436	
TITLE	VPD	<input checked="" type="checkbox"/> Delete
NAME	CORDWELL, JOHN	
STREET ADDRESS	4926 N COTTONWOOD PT.	
CITY-ST-ZIP	HERNANDO FL 34442	
TITLE	SD	<input type="checkbox"/> Delete
NAME	DAVIS, CAROL B	
STREET ADDRESS	10591 E. BALSAM	
CITY-ST-ZIP	INVERNESS FL 34450	
TITLE	TD	<input type="checkbox"/> Delete
NAME	HENSLEY, EMERY	
STREET ADDRESS	8682 E HENDERSON TRL.	
CITY-ST-ZIP	INVERNESS FL 34450	
TITLE	D	<input type="checkbox"/> Delete
NAME	GIDDENS, DONALD	
STREET ADDRESS	7820 E ALLEN DR.	
CITY-ST-ZIP	INVERNESS FL 34450	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BATSON, JAMES	
STREET ADDRESS	2473 HAMPSHIRE ST.	
CITY-ST-ZIP	INVERNESS FL 34453	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	John Cordwell	
STREET ADDRESS	4926 N Cottonwood Pt	
CITY-ST-ZIP	Hernando, FL 34442	
TITLE	Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Donald Sonnamaker	
STREET ADDRESS	3246 E Quail Court	
CITY-ST-ZIP	Inverness, FL 34452	
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	David Therrien	
STREET ADDRESS	2922 S Jean Avenue	
CITY-ST-ZIP	Inverness, FL 34450	
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Arthur Kelley	
STREET ADDRESS	6608 S Duval Island Drive	
CITY-ST-ZIP	Floral City, FL 34436	
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ogden Breckenridge	
STREET ADDRESS	6107 E Oneida Street	
CITY-ST-ZIP	Inverness, FL 34452	
TITLE	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Robert Turner	
STREET ADDRESS	2436 E Zellner Drive	
CITY-ST-ZIP	Inverness, FL 34450	

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: *[Signature]* **JOHN CORDWELL, PRESIDENT** **4-8-05**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #