

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703957

FILED
Feb 10, 2004
Secretary of State**Entity Name:** FLORIDA BAPTIST SCHOOLS, INC.**Current Principal Place of Business:**706 DEW BLOOM RD
BRANDON, FL 33511**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 2758
BRANDON, FL 33509**New Mailing Address:****FEI Number:** 23-7202810**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**KIRKLAND, H.R.
712 DEW BLOOM ROAD
BRANDON, FL 33511 US**Name and Address of New Registered Agent:**MCALISTER, RAYMOND
706 DEW BLOOM ROAD
BRANDON, FL 33511 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: RAYMOND MCALISTER

02/10/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTR () Delete
Name: GURGEL, DAVID G
Address: 104 ELAINE DR
City-St-Zip: AUBURNDALE, FL

Title: STR () Delete
Name: READ, JOHNNY M
Address: 1539 AUBURN OAKS CIRCLE
City-St-Zip: AUBURNDALE, FL 33823

Title: TR () Delete
Name: SOVINE, CRAIG
Address: 203 BALL PARK AVE
City-St-Zip: SUN CITY, FL 33586

Title: D () Delete
Name: KIRKLAND, H.R.
Address: 712 DEW BLOOM ROAD
City-St-Zip: BRANDON, FL 33511

Title: TR () Delete
Name: GARNER, ALBERT
Address: 6210 ORANGE VALLEY CIRCLE
City-St-Zip: LAKELAND, FL 33813

Title: TR () Delete
Name: LANIER, CLYDE W
Address: 456 AVENUE H SOUTHEAST
City-St-Zip: WINTER HAVEN, FL 33880

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TR (X) Change () Addition
Name: TOMLINSON, DON
Address: 710 LOBELIA STREET
City-St-Zip: BRANDON, FL 33510

Title: D (X) Change () Addition
Name: MCALISTER, RAYMOND
Address: 706 DEW BLOOM ROAD
City-St-Zip: BRANDON, FL 33511

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: RAYMOND MCALISTER

D

02/10/2004

Electronic Signature of Signing Officer or Director

Date