

2004 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT

FILED

Apr 22, 2004 8:00 am  
Secretary of State

04-22-2004 90105 019 \*\*\*\*61.25

DOCUMENT # 704189

1. Entity Name  
FIRST BAPTIST CHURCH OF OZONA-PALM HARBOR,  
INC.



Principal Place of Business  
610 PENNSYLVANIA AVE  
P.O. BOX 338  
OZONA, FL 34660

Mailing Address  
610 PENNSYLVANIA AVE  
P.O. BOX 338  
OZONA, FL 34660

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01062004

Chg-NP

CR2E037 (10/03)

4. FEI Number  
59-2125607

Applied For  
Not Applicable

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

MCDONALD, DOUGLAS  
611 PENN AVE  
OZONA, FL 34660

Name  
DOUGLAS KIRK  
Street Address (P.O. Box Number is Not Acceptable)  
610 PENNSYLVANIA AVE  
City  
OZONA FL Zip Code  
34660

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 *Douglas Kirk*

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

(NOTE: Registered Agent signature required when restatefing)

4/20/04

DATE

Filing Fee is \$61.25  
Due by May 1, 2004

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  
T  
CARNEY, DONALD  
2755 CURLEW RD #117  
PALM HARBOR, FL 34684 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
T  
BILL SUMMERS  
4378 WORTHINGTON CIRCLE  
PALM HARBOR, FL 34685 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
T  
BAIR, EARL  
1881 SHELLY DRIVE  
PALM HARBOR, FL 34684 ☒ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
T  
PAST  
MCDONALD, DOUGLAS A  
1644 ST. CATHERINE W.  
DUNEDIN, FL 34698 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PASTOR  
DOUGLAS KIRK  
613 PENNSYLVANIA AVE  
PALM HARBOR, FL 34683 ☒ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
T  
CAMPBELL, NEAL JR  
10910 OAK DR  
HUDSON, FL 34669 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
T  
MICHAEL STAMBAUGH  
509 ULELAH AVE  
PALM HARBOR, FL 34683 ☒ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
T  
JOHNSON, CLAYTON  
412 ULELAH AVE  
PALM HARBOR, FL 34684 ☒ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
T  
PEEPLES, DAVID  
9 HAIG PL #702  
DUNEDIN, FL 34698 ☐ Delete

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 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: *Douglas Kirk*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-20-04

Date

Daytime Phone #