2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704585

FILED Jul 21, 2004 Secretary of State

Entity Name: FIRST BAPTIST CHURCH OF MOORE HAVEN, INC.

Current P	rincipal Place	of Business:	New Principal Place	New Principal Place of Business:	
PO BOX 5	ND 3RD ST 666 HAVEN, FL 334	171	AVE J AND 3RD ST PO BOX 566 MOORE HAVEN, FL	33471	
Current M	lailing Addres	s:	New Mailing Addres	New Mailing Address:	
PO BOX 5	ND 3RD ST 666 HAVEN, FL 334	171	PO BOX 566 MOORE HAVEN, FL	PO BOX 566 MOORE HAVEN, FL 33471	
El Number	: 59-1885288	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
	DHN, JR. O & 6TH STRE IAVEN, FL 334		SMITH, JOHN, JR. PO BOX 566 MOORE HAVEN, FL	33471 US	
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,	
SIGNATUR	RE:			07/21/2004	
	Electron	ic Signature of Registered Age	ent	Date	
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Fitle: Name: Address: City-St-Zip:	DT () JONES, MICHA 698 AVE 5TH MOORE HAVEN		Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip:	D () GRIFFIN, DENN 1115 FOXMOO MOORE HAVEN	R ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: Dity-St-Zip:	SDAT () HAUSE, SUZAN 951 DANIELS F MOORE HAVEN	RD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip:	SD () TILLERY, DIAN P.O. BOX 905 MOORE HAVEN		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: DIANNE L TILLERY SD 07/21/2004