

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704585

FILED
Jan 16, 2005
Secretary of State

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

Current Principal Place of Business:

AVE J AND 3RD ST
PO BOX 566
MOORE HAVEN, FL 33471

New Principal Place of Business:

Current Mailing Address:

PO BOX 566
MOORE HAVEN, FL 33471

New Mailing Address:

FEI Number: 59-1885288

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, JOHN, JR.
PO BOX 566
MOORE HAVEN, FL 33471 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: JONES, MICHAEL
Address: 698 AVE 5TH
City-St-Zip: MOORE HAVEN, FL 33471

Title: D () Delete
Name: GRIFFIN, DENNIS
Address: 1115 FOXMOOR ST
City-St-Zip: MOORE HAVEN, FL 33471

Title: SDAT () Delete
Name: HAUSE, SUZANNE
Address: 951 DANIELS RD
City-St-Zip: MOORE HAVEN, FL 33471

Title: SD () Delete
Name: TILLERY, DIANNE L
Address: P.O. BOX 905
City-St-Zip: MOORE HAVEN, FL 33471

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change () Addition
Name: JONES, MICHAEL
Address: PO BOX 1012
City-St-Zip: MOORE HAVEN, FL 33471

Title: D (X) Change () Addition
Name: GRIFFIN, DENNIS
Address: PO BOX 777
City-St-Zip: MOORE HAVEN, FL 33471

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: DIANNE L TILLERY

SD

01/16/2005

Electronic Signature of Signing Officer or Director

Date