

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 03, 2006
Secretary of State

DOCUMENT# 704847

Entity Name: FAITH BAPTIST CHURCH OF PENSACOLA, INC.

Current Principal Place of Business:

3600 CREIGHTON RD.
PENSACOLA, FL 32504

New Principal Place of Business:

Current Mailing Address:

3600 CREIGHTON RD.
PENSACOLA, FL 32504

New Mailing Address:

FEI Number: 59-2393694 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATE, MARK
2990 RAINES STREET
PENSACOLA, FL 32514 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: D () Delete
Name: BORG, MARK
Address: 10161 CANDLESTICK LANE
City-St-Zip: PENSACOLA, FL 32514

Title: P () Delete
Name: MELOY, RICHARD C.,
Address: 3600 CREIGHTON RD
City-St-Zip: PENSACOLA, FL

Title: T () Delete
Name: PATE, MR MARK
Address: 2990 RAINES ST.
City-St-Zip: PENSACOLA, FL 32514

Title: D () Delete
Name: SPECK, DON
Address: 600 CASCADE DRIVE
City-St-Zip: PENSACOLA, FL 32503

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: PATE, MARK
Address: 2990 RAINES ST.
City-St-Zip: PENSACOLA, FL 32514

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 Chapter 119, 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: MARK T. PATE, SR.

T

01/03/2006

Electronic Signature of Signing Officer or Director

_____ Date