2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704988

Name:

Address:

City-St-Zip:

Apr 07, 2005 Secretary of State

Entity Name: FIRST BAPTIST CHURCH OF BONITA SPRINGS, INC.

Current Principal Place of Business: New Principal Place of Business: 28440 MANGO DR. BONITA SPRINGS, FL 34134 US **Current Mailing Address: New Mailing Address:** 28440 MANGO DR BONITA SPRINGS, FL 34134 US FEI Number: 59-1085751 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CAMPBELL, VICKIE 28440 MANGO DRIVE BONITA SPRINGS, FL 34134 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete CROWE, WENDELL CROWE, WENDELL Name: Name: 27451 POLLARD DRIVE Address: 27288 BARBAROSSA ST. Address: City-St-Zip: BONITA SPRINGS, FL 34135 City-St-Zip: BONITA SPRINGS, FL 34135 Title: () Delete Title: () Change () Addition GAMENTHALER, ALAN Name: Name: Address: 21044 LAZY D. FARM RD. Address: City-St-Zip: ESTERO, FL 33928 City-St-Zip: Title: () Delete Title: (X) Change () Addition CAMPBELL, RICK CAMPBELL, RICK Name: Name: 10301 JEF-NIK LANE Address: Address: 10301 JEF NIK LANE City-St-Zip: BONITA SPRINGS, FL 34135 City-St-Zip: BONITA SPRINGS, FL 34135 Title: () Delete Title: () Change (X) 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.

Name:

Address:

City-St-Zip:

CROWE, RAYMOND

9751 PENNSYLVANIA AVE.

BONITA SPRINGS, FL 34135

SIGNATURE: WENDELL CROWE PT 04/07/2005