

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # 705208

1. Entity Name

THE BROWNSVILLE BAPTIST CHURCH, INC.



FILED
Feb 22, 2007 08:00 AM
Secretary of State

Principal Place of Business

2601 W STRONG STREET
PENSACOLA FL 32505-4128

Mailing Address

2601 W STRONG STREET
PENSACOLA FL 32505-4128



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/06)

City & State

City & State

4. FEI Number

59-6002499

Applied For

Not Applicable

Zip

Country

Zip

Country

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

JACKSON, THOMAS
2406 INDA AVENUE
PENSACOLA FL 32506

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Thomas Jackson

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

(NOTE: Registered Agent signature required when registering)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

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

TITLE: TD ☐ Delete
NAME: FOSTER, JANE
STREET ADDRESS: 909 N. 75TH AVE
CITY-STATE-ZIP: PENSACOLA FL

TITLE: PD ☐ Delete
NAME: JACKSON, THOMAS
STREET ADDRESS: 2406 INDA AVENUE
CITY-STATE-ZIP: PENSACOLA FL

TITLE: DV ☐ Delete
NAME: JERNIGAN, N L
STREET ADDRESS: 7488 BRIGHTWOOD ST
CITY-STATE-ZIP: PENSACOLA FL 32506

TITLE: D ☐ Delete
NAME: GILLESPIE, WILLARD J
STREET ADDRESS: 1120 NORTH V STREET
CITY-STATE-ZIP: PENSACOLA FL 32505

TITLE: SD ☐ Delete
NAME: NICKLES, R J
STREET ADDRESS: 3804 W CERVANTES ST
CITY-STATE-ZIP: PENSACOLA FL 32505

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:
U00000644001
03/02/07-80025-012 61.25

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

Thomas Jackson Thomas Jackson 2/2/07 (850) 944-2646