

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705644

FILED
Mar 09, 2005
Secretary of State

Entity Name: THE FIRST BAPTIST CHURCH, MARY ESTHER, FLORIDA, INC.

Current Principal Place of Business:

28 NORTH STREET
MARY ESTHER, FL 32569

New Principal Place of Business:

Current Mailing Address:

28 NORTH STREET
MARY ESTHER, FL 32569

New Mailing Address:

FEI Number: 59-1696431

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOFSTAD, O.J.
311 SOUTH LORRAINE
MARY ESTHER, FL 32569 US

Name and Address of New Registered Agent:

FRIAR, GENE
3110 PGA BLVD
NAVARRE, FL 32566 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: GENE FRIAR

03/09/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PM () Delete
Name: HOFSTAD, O.J.
Address: 311 SOUTH LORRAINE
City-St-Zip: MARY ESTHER, FL 32569 US

Title: SD () Delete
Name: WENTWORTH, MARILYN
Address: 241 S LORRAINE DRIVE
City-St-Zip: MARY ESTHER, FL 32569

Title: D () Delete
Name: MCCALLEY, GEORGE
Address: 1502 PONDEROSA #4
City-St-Zip: FT WALTON BEACH, FL 32547

Title: VP () Delete
Name: FERRELL, KEN
Address: 222 CRESCENT WOOD
City-St-Zip: NAVARRE, FL 32566

Title: T () Delete
Name: MILLER, DAVID
Address: 149 BRYN MAWR
City-St-Zip: MARY ESTHER, FL 32569

Title: D () Delete
Name: HOWARD, LARRY
Address: 119 BOB SIKES BLVE #1
City-St-Zip: FORT WALTON BEACH, FL 32547

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PM (X) Change () Addition
Name: FRIAR, GENE
Address: 3110 PGA BLVD
City-St-Zip: NAVARRE, FL 32566 US

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

Title: V (X) Change () Addition
Name: MASON, PHILIP
Address: 1926 RUE LA FONTAINE
City-St-Zip: NAVARRE, FL 32566

Title: D (X) Change () Addition
Name: FERRELL, KEN
Address: 222 CRESCENT WOOD
City-St-Zip: NAVARRE, FL 32566

Title: T (X) Change () Addition
Name: MILLER, DAVID
Address: 8358 TORRES ST
City-St-Zip: NAVARRE, FL 32566

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: DAVID MILLER

T

03/09/2005

Electronic Signature of Signing Officer or Director

Date