## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 705644**

FILED Mar 29, 2006 Secretary of State

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

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
28 NORTH MARY EST	HSTREET THER, FL 325	69			
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
28 NORTH MARY EST	HSTREET THER, FL 325	69			
FEI Number:	: 59-1696431	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:	
FRIAR, GE 3110 PGA NAVARRE		US			
	named entity e of Florida.	submits this statement for the	purpose of changing its registe	red office or registered agent, or both,	
SIGNATUF		sia Ciamatura of Docietared Ac	-aut	Dete	
OFFICERS	Electron S AND DIREC	nic Signature of Registered Ag TORS:		Date GES TO OFFICERS AND DIRECTORS:	
Title:		) Delete	Title:	( ) Change ( ) Addition	
Name: Address: City-St-Zip:	FRIAR, GENE 3110 PGA BLV NAVARRE, FL	D	Name: Address: City-St-Zip:		
Title:		) Delete	Title:	()Change ()Addition	
Name: Address: City-St-Zip:	WENTWORTH 241 S LORRAII MARY ESTHER	MARILYN NE DRIVE	Name: Address: City-St-Zip:	(,,	
Title:	V (	) Delete	Title:	( ) Change ( ) Addition	
Name: Address:	MASON, PHILII 1926 RUE LA F		Name: Address:		
City-St-Zip:	NAVARRE, FL		City-St-Zip:		
Title:	D (	) Delete	Title:	() Change () Addition	
Name:	FERRELL, KEN		Name:		
Address: City-St-Zip:	222 CRESCEN NAVARRE, FL		Address: City-St-Zip:		
Title:	Т (	) Delete	Title:	( ) Change ( ) Addition	
Name:	MILLER, DAVID		Name:		
Address: City-St-Zip:	8358 TORRES NAVARRE, FL		Address: City-St-Zip:		
	D (	) Delete	Title:	( ) Change ( ) Addition	
Title:		RY	Name:		
Title: Name: Address:	HOWARD, LAR		Address:		

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: MARILYN SIZEMORE SD 03/29/2006