


**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 09, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 707159</b> 1. Entity Name FIRST BAPTIST CHURCH OF COCOA BEACH INC.	
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Principal Place of Business 830 SOUTH ATLANTIC AVENUE COCOA BEACH, FL 32931	Mailing Address 830 SOUTH ATLANTIC AVENUE COCOA BEACH, FL 32931
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01042006 No Chg-NP CR2E037 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-1152517	Applied For Not Applicable
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5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent  BABINGTON, KEN 830 SOUTH ATLANTIC AVENUE COCOA BCH, FL 32931
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**DO NOT WRITE IN THIS SPACE**

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: *Ken Babington*  
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE

**Filing Fee is \$61.25  
Due by May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD POTTINGER, JAMES 3665 RIO VISTA WAY MELBOURNE, FL 32937
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ZINGERELLA, JOHN 2510 AUBURN DR. COCOA, FL 32926
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JOHNSON, DON 411 DEMPSEY DR COCOA BEACH, FL 32931
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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01/11/06-80007-009 70.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *James Pottinger*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #