## . 2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## FILED Apr 19, 2004 08:00 AM **DOCUMENT # 707308 Secretary of State** NEW FELLOWSHIP BAPTIST CHURCH, INC. Principal Place of Business Mailing Address 1840 OLD DIXIE HWY 1840 OLD DIXIE HWY TITUSVILLE, FL 32796 TITUSVILLE, FL 32796 04152004 No Chg-NP CR2E037 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 23-7410324 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HANSON, JERRY R., SR. DO NOT WRITE 1840 OLD DIXIE HIGHWAY TITUSVILLE, FL 32796 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 Signature, typod or phinted name of registered agent and tale if applicable. (NOTE: Registered Agent signature required when renstang) Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Due by May 1, 2004 OFFICERS AND DIRECTORS 10. U00000119118 04/19/04-80087-025 61.25 TITLE NAME HANSON, JERRY R. SR. STREET ADDRESS **3621 SUNNY DR** CITY-ST-ZIP MIMS, FL TITLE LUBINSKI, BOB STREET ADDRESS 4172 CINNAMON TEAL CITY-ST-ZIP MIMS, FL 32754 TITLE NAXE CONKLIN, DOUG STREET ADDRESS 2517 PALM AVE DO NOT WRITE CITY-ST-ZIP MIMS, FL 32754 IN THIS SPACE TITLE NAME ALLEN, JAMES STREET ADDRESS 2965 BRIAR WOOD LN. CITY-ST-ZP TITUSVILLE, FL TITLE NAME NEASE, PAULA STREET ADDRESS 2929 COOPER DR CITY-ST-ZIP TITUSVILLE, FL 32796 TILE

12. I horeby certify that the information supplied with this filling does not qualify 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 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, I further certify that the Information indicated in the receiver of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, I further certify that the Information indicated in the Information indicated and I am an officer or director of the corporation or the receiver or trustee and statutes. RO. JORRY R. HANSON, SR.

ER OR DIRECTOR

NAME

STREET ADDRESS