

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

FILED
Jan 13, 2006 08:00 AM
Secretary of State

DOCUMENT # 707333

1. Entity Name
**NORTH CENTRAL BAPTIST CHURCH OF GAINESVILLE,
FLORIDA, INC.**



Principal Place of Business
**8001 NW 23 AVE.
GAINESVILLE, FL 32606**

Mailing Address
**8001 NW 23 AVE.
GAINESVILLE, FL 32606**



01042006 No Chg-NP CR2E037 (11/05)

4. FEI Number
02-0008706

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**JONES, LLOYD E III
404 NW 14 AVE
GAINESVILLE, FL 32601**

**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

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

(NOTE: Registered Agent signature required when reinstating)

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 WELDON, WILLIAM 5606 N.W. 55 LANE GAINESVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PALMER, ZANE 8811 S.W. 8TH AVE. GAINESVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WATERS, PAUL 1105 NE 156 AVE GAINESVILLE, FL 32609
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01/18/06-80048-018 61.25

**DO NOT WRITE
IN THIS SPACE**

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: William M. Weldon **WILLIAM M. WELDON**

01-04-06 **352-372-1383**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #