2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 12, 2006 8:00 am
Secretary of State
05-12-2006 90026 049 ****61.25

DOCUMENT # 707678

1. Entity Name
ROANOKE BAPTIST CHURCH INC

Principal Place of Business	Mailing Address
1320 DOUGLAS AVE WEST PALM BEACH, FL 33401	1060 W 2ND ST. RIVIERA BCH., FL 33404

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04062006 No Chg-NP CR2E037 (11/05)

4. FEI Number
50-0322260
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MCDONALD, HERBERT
173 SUNFLOWER CIRCLE
ROYAL PALM BEACH, FL 33411

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	V
NAME	MCKINNEY, WILLIE L
STREET ADDRESS	1060 W. 2ND STREET
CITY-ST-ZIP	RIVIERA BEACH, FL
TITLE	T
NAME	TURNER, WILBERT
STREET ADDRESS	1447 8TH STREET
CITY-ST-ZIP	WEST PALM BEACH, FL
TITLE	D
NAME	KERBO, JOHN
STREET ADDRESS	1134 WEST 23RD ST.
CITY-ST-ZIP	RIVIERA BEACH, FL 33404
TITLE	D
NAME	COOK, JESSIE
STREET ADDRESS	533 S MAGONIA CIR.
CITY-ST-ZIP	W PALM BEACH, FL
TITLE	S
NAME	MCDONALD, HERBERT
STREET ADDRESS	173 SUN FLOWER CIRCLE
CITY-ST-ZIP	ROYAL PALM BEACH, FL 33411
TITLE	P
NAME	JOHNSON, MAURICE REV
STREET ADDRESS	822 14TH STREET
CITY-ST-ZIP	WEST PALM BEACH, FL 33401

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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: Willie McKinney - Willie Mc Kinney 4/5/06 561 386-9037
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #