2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708394

FILED May 11, 2004 Secretary of State

Entity Name: FIRST BAPTIST CHURCH OF MIMS, INCORPORATED

urrent P	rincipal Place	of Business:	New Princi	pal Place o	of Business:
395 KEN IIMS, FL	TUCKY AVE 32754 US				
urrent M	lailing Address	s:	New Mailin	g Address	:
395 KEN IIMS, FL	TUCKY AVE 32754 US				
El Number	: 59-0992910	FEI Number Applied For ()	FEI Number Not Appli	cable ()	Certificate of Status Desired ()
ame and	d Address of C	urrent Registered Agent:	Name and	Address of	New Registered Agent:
,	MDEN R NTLINE RD., E. 32754 US				
					office or registered agent, or be
	e named entity s e of Florida.	ubmits this statement for the	purpose of changing its	s registerea	office of registered agent, of bo
the State	e of Florida.	ubmits this statement for the	purpose of changing its	s registerea	office of registered agent, or bo
the State	e of Florida. RE:	ubmits this statement for the c Signature of Registered Ac		s registered	Date
the State	e of Florida. RE:	c Signature of Registered Ac	gent		
the State	e of Florida. RE: Electroni S AND DIRECT	c Signature of Registered Ac CORS: Delete	gent	S/CHANGE	Date
the State IGNATUI FFICER: tte: ame: ddress:	e of Florida. RE: Electroni S AND DIRECT PD () BARE, CAMDEN 3610 GRANTLIN MIMS, FL	c Signature of Registered Ag ORS: Delete R E RD. EAST	gent ADDITION: Title: Name: Address:	S/CHANGE	Date S TO OFFICERS AND DIRECT
the State GNATUR FFICERS tle: ame: ddress: tty-St-Zip: tle: ame: ddress:	e of Florida. RE: Electroni S AND DIRECT PD () BARE, CAMDEN 3610 GRANTLIN MIMS, FL SD () SHEALY, J.T. 2111 TURPENTI MIMS, FL	c Signature of Registered Ag **TORS:* Delete R E RD. EAST Delete NE RD POB84	gent ADDITIONS Title: Name: Address: City-St-Zip: Title: Name: Address:	S/CHANGE	Date S TO OFFICERS AND DIRECT () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CAMDEN R. BARE PD 05/11/2004