

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2005 08:00 A
Secretary of State

DOCUMENT # 708640
 1. Entity Name
 WEST JACKSONVILLE BAPTIST CHURCH, INC.



Principal Place of Business Mailing Address
 5634 NORMANDY BLVD 5634 NORMANDY BLVD
 JACKSONVILLE, FL 32205 JACKSONVILLE, FL 32205



01102005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
 59-0911199 Not Applicable

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

6. Name and Address of Current Registered Agent
 KELLEY, RODNEY L
 2917 TURNING LEAF LANE
 JACKSONVILLE, FL 32221

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 _____ (NOTE Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2005

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	KELLEY, RODNEY L
STREET ADDRESS	2917 TURNING LEAF LANE
CITY-ST-ZIP	JACKSONVILLE, FL 32221
TITLE	VP
NAME	W.W. MEEKS
STREET ADDRESS	7770 BURMA RD
CITY-ST-ZIP	JACKSONVILLE, FL 32221
TITLE	SD
NAME	SAPP, TOMMY
STREET ADDRESS	8245 OLD PLANK ROAD
CITY-ST-ZIP	JACKSONVILLE, FL 32220
TITLE	TD
NAME	SMITH, GEORGE
STREET ADDRESS	7748 STILLWELL ROAD
CITY-ST-ZIP	JACKSONVILLE, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

DOCUMENT# 708640
 01/27/05-80011-019 \$1.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Rodney L. Kelley* 1-19-05 904-781-4321

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #