


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2008 8:00 am
Secretary of State

03-03-2008 90186 001 ****61.25

DOCUMENT # 710062 1. Entity Name FRONTENAC BAPTIST CHURCH HOLDING CORP., INC.					
Principal Place of Business 5500 N. US 1 FRONTENAC, FL 32927			Mailing Address P O BOX 191 SHARPES, FL 32959		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		01082008 Chg-NP CR2E037 (12/06)	
Zip		Country		4. FEI Number 59-1110981	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
MEIGHAN, ROBERT A 2690 FRIDAY ROAD COCOA, FL 32926			Name Paul L Kruse Jr. Street Address (P.O. Box Number is Not Acceptable) 165 South Kenneth Ct City Merritt Island FL 32952		
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 <u>Paul L Kruse Jr</u> <i>Paul L Kruse Jr</i> 2-27-08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	STD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KRUSE, PAUL L JR		NAME	PD	
STREET ADDRESS	165 S KENNETH COURT		STREET ADDRESS	Paul L Kruse Jr	
CITY - ST - ZIP	MERRITT ISLAND, FL 32952		CITY - ST - ZIP	165 South Kenneth Ct. Merritt Is. Fl	
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE	STD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MEIGHAN, ROBERT A		NAME	Ervin Walker, 125 Falcon Blvd	
STREET ADDRESS	2690 FRIDAY ROAD		STREET ADDRESS	Cocoa, Fl. 32927	
CITY - ST - ZIP	COCOA, FL 32926		CITY - ST - ZIP		
TITLE	VD	<input checked="" type="checkbox"/> Delete	TITLE	VD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOBLEY, ARTHUR D		NAME	Charles Wines, 4102 Fountain Palm Rd	
STREET ADDRESS	5601 BANOS ST		STREET ADDRESS	Cocoa, F. 32926	
CITY - ST - ZIP	COCOA, FL 32927		CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY - ST - ZIP			CITY - ST - ZIP		
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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
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: Paul L Kruse Jr <i>Paul L Kruse Jr</i> 2-28-08 321-453-6206 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					