

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710194

FILED
Jul 26, 2004
Secretary of State

Entity Name: FLORIDA CARIBBEAN BAPTIST CONFERENCE, INC.

Current Principal Place of Business:

1326 WYNGATE DR
LAKELAND, FL 33809 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 91865
LAKELAND, FL 338041865 US

New Mailing Address:

FEI Number: 59-1459720

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, STEVE
1326 WYNGATE DR
LAKELAND, FL 33809 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SMITH, STEVE
Address: 1326 WYNGATE DR
City-St-Zip: LAKELAND, FL 33809

Title: T () Delete
Name: WINDMILLER, DON
Address: 2211 41ST ST WEST
City-St-Zip: BRADENTON, FL 34205

Title: T () Delete
Name: AMOS, EUGENE
Address: 7500 ALHAMBRA BLVD.
City-St-Zip: MIRAMAR, FL

Title: T () Delete
Name: HAWKINS, HARVEY
Address: 6904 SUMERBRIDGE DR
City-St-Zip: TAMPA, FL 33634

Title: T () Delete
Name: WELDON, STEVE
Address: 8119 CHAMPION CIRCLE
City-St-Zip: CHAMPIONS GATE, FL 33896

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: STEVE SMITH

PD

07/26/2004

Electronic Signature of Signing Officer or Director

Date