2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#710194

FILED Jan 24, 2006 Secretary of State

Entity Name: FLORIDA CARIBBEAN BAPTIST CONFERENCE, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
1326 WYN LAKELAND	GATE DR), FL 33809	US			
Current Mailing Address:			New Mailir	New Mailing Address:	
P O BOX 9 LAKELAND	1865), FL 3380418	65 US			
FEI Number:	59-1459720	FEI Number Applied For ()	FEI Number Not Appli	icable () Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
SMITH, STEVE 1326 WYNGATE DR LAKELAND, FL 33809 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,					
in the State					
SIGNATUR		ic Signature of Registered Ager	nt .	Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name:	SMITH, STEVE 1326 WYNGATE LAKELAND, FL T () WINDMILLER, I 2211 41ST ST V BRADENTON, F	33809 Delete DON WEST L 34205 Delete	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name:	() Change () Addition T (X) Change () Addition SUTHERLAND, LARRY 6608 WOOD MEADOW LOOP BRADENTON, FL 34202 () Change () Addition	
Address: City-St-Zip: Title: Name: Address: City-St-Zip:	7500 ALHAMBR MIRAMAR, FL	A BLVD. Delete VEY RIDGE DR	Address: City-St-Zip: Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	WELDON, STEV 8119 CHAMPIO CHAMPIONS GA	N CIRCLE	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	T (X) Change () Addition PHILLIPS, MERCIDIEU 538 WHISPERING WIND LEHIGH ACRES, FL 33970 S () Change (X) Addition ROSS, JOANN 13965 ROCKRIDGE ROAD LAKELAND, FL 33809	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: JOANN JOHNSTON-ROSS S 01/24/2006