

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710194

FILED
Jan 02, 2007
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: SUTHERLAND, LARRY
Address: 6608 WOOD MEADOW LOOP
City-St-Zip: BRADENTON, FL 34202

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: PHILLIPS, MERCIDIEU
Address: 538 WHISPERING WIND
City-St-Zip: LEHIGH ACRES, FL 33970

Title: S () Delete
Name: ROSS, JOANN
Address: 13965 ROCKRIDGE ROAD
City-St-Zip: LAKELAND, FL 33809

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
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Address:
City-St-Zip:

Title: () Change () Addition
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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 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

MRS.

01/02/2007

Electronic Signature of Signing Officer or Director

Date