


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 14, 2006 08:00 AM
Secretary of State

DOCUMENT # 710734
1. Entity Name
FIRST BAPTIST CHURCH OF HYPOLUXO, INC.



Principal Place of Business Mailing Address
7479 OVERLOOK RD 7479 OVERLOOK RD
LANTANA, FL 33462-5331 LANTANA, FL 33462-5331

DO NOT WRITE IN THIS SPACE



04042006 No Chg-NP CR2E037 (11/05)

4. FEI Number 59-1271632	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

LUND, JOHN.
1156 HIGHLAND RD.
LANTANA, FL 33462

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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SANFORD, DELBERT 3330 VALLEY ROAD APT. A BOYNTON BEACH, FL 33435
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUND, JOHN 1156 HIGHLAND ROAD LANTANA, FL 33462
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD REILING, MARLIN 5381 PLAINS DRIVE LAKE WORTH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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04/28/06-80004-012 61.25

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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: MARLIN REILING 4/11/06 561-585-6463
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #