2006 NOT-FOR-PROFIT CORPORATION - ANNUAL REPORT (AR)

## Feb 03, 2006 08:00 AM **DOCUMENT # 711526 Secretary of State** 1. Entity Name OLIVET BAPTIST CHURCH, INC., OCALA, FLORIDA Principal Place of Business Mailing Address 8495 S. MAGNOLIA AVENUE 8495 S. MAGNOLIA AVENUE **OCALA FL 34476** OCALA FL 32676 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ist MOORE CR2E037 (10/05) City & State City & State Applied For 4. FEI Number 59-2375566 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BUHL, JAMES D JR 7530 SW 38TH AVE Street Address (P.O. Box Number is Not Acceptable) OCALA FL 34476 Zip Code City 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. U00000419027 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent aignature required when reinstancy) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. MHE ☐ Detete me ☐ Addition BUHL, JIMMY NAME NAMI 7530 S.W. 38TH COURT STREET ADDRESS STREET ADDRESS OCALA FL CITY - ST- ZIP CITY - ST - ZIP TITLE ☐ Oclete THE ☐ Change ☐ Addition ESCOBAR, KATHY NAME NAME 411 SE 82 PLACE STREET ADDRESS STREET ACORESS CITY-SI-ZIP OCALA FL 34480 CHY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME PARKER, DAVID NAME SPACET ADDRESS 615 SE 43RD AVE. STREET ADDRESS CITY-ST-ZIP OCALA FL 34471 CITY ST ZIP DILE ☐ Defete 3600 Change ■ Addition PHELPS, GARY JR NAME STREET ADDRESS 2805 SE 80TH STREET STREET ADDRESS CITY-SY-ZIP OCALA FL 34480 CHY-ST-ZIP 7112.6 ☐ Delete TITLE ☐ Change ☐ Addition BATTEN, H.C. NAME 10980 SW 27TH AVE. STREET ADDRESS STREET ADDRESS OCALA FL CITY-ST-ZIP CITY SI-ZIP RELE ☐ Delete TITCE ☐ Change ■ Addition RICHARDS, BRADLEY NAME MAM 12945 SW 8TH AVENUE STREET ADDRESS STREET ADDRESS **OCALA FL 34473** 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 Section 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 path; 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.

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**FILED**