

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

FILED
Apr 10, 2006 08:00 AM
Secretary of State

DOCUMENT # 711798

1. Entity Name
BASINGER CHRISTIAN BROTHERN CHURCH, INC.



Principal Place of Business
**16525 HIGHWAY 98 NORTH
OKEECHOBEE, FL 34972**

Mailing Address
**16525 HIGHWAY 98 NORTH
OKEECHOBEE, FL 34972**



03072006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2457953

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**BASS, ELDA MAE
16525 HWY 98 N
OKEECHOBEE, FL 34972**

**DO NOT WRITE
IN THIS SPACE**

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 recasting)

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	D
NAME	ARNOLD, KEVIN
STREET ADDRESS	HWY 98 N
CITY-ST-ZIP	OKEECHOBEE, FL 34972
TITLE	D
NAME	LAFLAM, DALE
STREET ADDRESS	HWY 98 N
CITY-ST-ZIP	OKEECHOBEE, FL 34972
TITLE	S
NAME	LANIER, BETTY JEAN
STREET ADDRESS	HWY 98 NORTH
CITY-ST-ZIP	OKEECHOBEE, FL
TITLE	D
NAME	ARNOLD, JESSE R.
STREET ADDRESS	HWY 98 NORTH
CITY-ST-ZIP	OKEECHOBEE, FL
TITLE	M
NAME	ARNOLD, MONROE
STREET ADDRESS	HWY 98 N
CITY-ST-ZIP	OKEECHOBEE, FL 34972
TITLE	T
NAME	BASS, ELDA M
STREET ADDRESS	HWY 98 N
CITY-ST-ZIP	OKEECHOBEE, FL 34972

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04/25/06-80036-020 61.25

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IN THIS SPACE**

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: Elda Mae Bass Elda Mae Bass

3-15-06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #