

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

**FILED**  
**Jan 25, 2006**  
**Secretary of State**

DOCUMENT# 711946

**Entity Name:** THE FIRST BAPTIST CHURCH OF THE CITY OF ST. AUGUSTINE, FLORIDA

**Current Principal Place of Business:**

81 ST. FRANCIS ST.  
ST AUGUSTINE, FL 32084

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 96  
ST. AUGUSTINE, FL 32085

**New Mailing Address:**

**FEI Number:** 00-7119460      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MORGAN, JAMES E  
832 W 3RD ST  
SAINT AUGUSTINE, FL 32084      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: S      ( ) Delete
- Name: WHITE, HATTIE
- Address: 94 SOUTH STREET
- City-St-Zip: ST. AUGUSTINE, FL
  
- Title: CT      ( ) Delete
- Name: MORGAN, JAMES E
- Address: 832 W 3RD STREET
- City-St-Zip: ST. AUGUSTINE, FL 32095
  
- Title: TTR      ( ) Delete
- Name: JAMES, GLORIA
- Address: 64 PALMER STREET
- City-St-Zip: ST. AUGUTSTINE, FL
  
- Title: TR      ( ) Delete
- Name: MURRY, TIMOTHY
- Address: 142 BLANCO STREET
- City-St-Zip: SAINT AUGUSTINE, FL 32095
  
- Title: VCT      ( ) Delete
- Name: ETHERIDGE, JANICE
- Address: 74 PALMER STREET
- City-St-Zip: SAINT AUGUSTINE, FL 32084
  
- Title: TR      ( ) Delete
- Name: JEFFERSON, MICHAEL
- Address: 133 BREN MAR LANE
- City-St-Zip: PALM COAST, FL 32137

**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
- Name:
- Address:
- 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: JAMES E. MORGAN

CT

01/25/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date