

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

FILED
Apr 04, 2006 8:00 am
Secretary of State

04-04-2006 90048 019 ****61.25

DOCUMENT # 713424

1. Entity Name

REGENCY BAPTIST TEMPLE, INC.



Principal Place of Business

1130 REGERO ROAD
JACKSONVILLE FL 32211

Mailing Address

1130 REGERO ROAD
JACKSONVILLE FL 32211

2. Principal Place of Business

1130 REGERO ROAD

Suite, Apt. #, etc.

3. Mailing Address

1130 REGERO ROAD

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-7336029

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/05)



6. Name and Address of Current Registered Agent

FLOWERS, RALPH B.
3580 SIMCA DRIVE WEST
JACKSONVILLE FL 32277

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME FLOWERS, RALPH
STREET ADDRESS 3580 SIMCA DRIVE WEST
CITY-ST-ZIP JACKSONVILLE FL 32277

TITLE D ☐ Delete
NAME REGINA, GARY
STREET ADDRESS 1007 PLANTATION OAKS DR E
CITY-ST-ZIP JACKSONVILLE BEACH FL 32250

TITLE S ☐ Delete
NAME FLOWERS, CATHY
STREET ADDRESS 3580 SIMCA DRIVE WEST
CITY-ST-ZIP JACKSONVILLE FL 32277

TITLE DT ☒ Delete
NAME SEUIS, ROGER
STREET ADDRESS 6786 BRANDEMERE RD N.
CITY-ST-ZIP JACKSONVILLE FL 32211

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME DONNA L. ALEXANDER
STREET ADDRESS 1935 AFTON LANE
CITY-ST-ZIP JACKSONVILLE, FL. 32211

TITLE ☐ Change ☒ Addition
NAME MIKE BAKER
STREET ADDRESS 2575 WHITE HORSE ROAD W.
CITY-ST-ZIP JACKSONVILLE, FL. 32246

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 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:

Ralph Flowers

3/17/06 805-0505