2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Secretary of State **DOCUMENT #715175** 03-14-2006 90039 032 ****61.25 WESTGATE BAPTIST CHURCH, INC. Principal Place of Business Mailing Address 901 NW 112TH AVENUE 901 NW 112TH AVENUE 50002574 PLANTATION, FL 33325-1502 US PLANTATION, FL 33325-1502 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02152006 Chg-NP CR2E037 (11/05) City & State City & State 4. FEI Number 59-1947034 Applied For Not Applicable 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 BERNAT, JOHN 12221 NW 30 TH STREET Street Address (P.O. Box Number is Not Acceptable) SUNRISE, FL 33323 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 tate if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Make check payable to 9. Election Campaign Financing Filing Fee is \$61.25 \$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. PTD TITLE ☐ Delete TITLE Change Addition NAME BERNAT, JOHN NAME 12221 NW 30TH STRET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SUNRISE, FL 33323 CITY-ST-ZIP VD TITLE ☐ Delete ☐ Change ☐ Addition **EVANS, DARIN** NAME NAME STREET ADDRESS 903 NW 112TH AVE STREET ADDRESS PLANTATION, FL 33325 CITY-ST-ZIP CITY-ST-7P TITLE ☐ Delete TITLE ☐ Addition Same LANCIAULT, MICHAEL NAME NAME 11801 NW & thust STREET ADDRESS 9700 NW 33RD ST STREET ADDRESS Plantation, FL 33324 CITY-ST-7P SUNRISE, FL 33351 CITY-ST-7IP TITLE ☐ Delete πпе ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE D Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP COY-ST-7P 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 jother like empowered.

Evans

FILED

Mar 14, 2006 8:00 am

954-472-6352

PAID CK \$ 15157 , \$61.25

SIGNATURE: