## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Jan 26, 2006 8:00 am Secretary of State

1. Entity Name COMMUNITY BAPTIST CHURCH OF SEFFNER, INC.								01-26-200	_		61.25	
Principal Place of Business 1407 PARK STREET BOX 175 SEFFNER, FL 33584			BOX	Mailing Address BOX 175 SEFFNER, FL 33584				<del>                                    </del>		HIC BLOCK BLOCK OLI	EN GIAN ELAK AN	
2. Principal Place of Business			3. Mait	3. Mailing Address								
Suite, Apt. #, etc.			Sui	Suite, Apt. #, etc.				01182006	Chg-NP	CR2E0	37 (11/05)	
City & State			Cit	City & State				4. FEI Numbe 59-216	7035			oplied For ot Applicable
2ip 33583 Country				Zip Cou 33583			5. Certificate of Status Desired   \$8.75 Additional Fee Required					ditional ed
		and Address of Curren	t Registere	d Agent				7. Name and	Address of New	Registered	Agent	
SECIEV D	AVID					Name						
SEELEY, DAVID 4118 MIDWAY RD. PLANT CITY, FL 33565					Street Address (P.O. Box Number is Not Acceptable)							
	.,					City					Zip Cod	In
e e e e e e e e e e e e e e e e e e e				City						FL	•   Zip Coo	e
the obligation	named entity ons of registe	y submits this statement fered agent.	for the purp	ose of changing its	register	ed office o	r register	ed agent, or bot	h, in the State of f	Florida. I am	familiar with,	and accept
SIGNATURE	Planation toward	or printed name of registered ager										<del></del>
<u> </u>	Signature, typed i	or printed halfe or registered ager	и вки вин верр	IICEDIO. (NO	E: Registere	ia Agent signal	ture required	when reinstating)		DATE		
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12. I hereby certify that the information supplied with this filling 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: \_

SGNING OFFICER OR DIRECTOR

1/18/06

813-719-9647