

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717051

FILED
Apr 12, 2004
Secretary of State

Entity Name: FIRST BAPTIST CHURCH OF KEYSTONE HEIGHTS, INC.

Current Principal Place of Business:

550 SE WALKER DRIVE
KEYSTONE HEIGHTS, FL 32656

New Principal Place of Business:

Current Mailing Address:

550 SE WALKER DRIVE
KEYSTONE HEIGHTS, FL 32656

New Mailing Address:

FEI Number: 59-1459578

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAXWELL, MARK
5055 KLAZE DRIVE
KEYSTONE HEIGHTS, FL 32656 US

Name and Address of New Registered Agent:

MAXWELL, MARK
5055 KLARE DRIVE
KEYSTONE HEIGHTS, FL 32656 US

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:

04/12/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PROSE, JAMES
Address: 560 LAKEVIEW
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: T () Delete
Name: JAROSZ, ROSALIE
Address: 5321 CR 352
City-St-Zip: KEYSTONE HEIGHTS, FL

Title: TD () Delete
Name: FUTCH, M.B.,
Address: 340 E WALKER DR
City-St-Zip: KEYSTONE HGTS, FL 00000,

Title: S () Delete
Name: CARTER, BARBARA
Address: 6980IMMOKALEE ROAD
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

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: S (X) Change () Addition
Name: CARTER, BARBARA
Address: 6980 IMMOKALEE ROAD
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 PROSE

D

04/12/2004

Electronic Signature of Signing Officer or Director

Date