


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2006 8:00 am
Secretary of State

03-13-2006 90076 023 ****61.25

DOCUMENT # 718735 1. Entity Name HALIFAX BAPTIST ASSOCIATION, INC.																																																																																																								
Principal Place of Business 201 OSCEOLA AVENUE DAYTONA BCH, FL 32114-0427			Mailing Address 201 OSCEOLA AVENUE DAYTONA BCH, FL 32114-0427																																																																																																					
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Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																																																						
City & State		City & State																																																																																																						
Zip	Country	Zip	Country																																																																																																					
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent																																																																																																					
BELZ, DENNIS 201 OSCEOLA AVENUE DAYTONA BEACH, FL 32114			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>																																																																																																					
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>																																																																																																								
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees																																																																																																				
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> 10. 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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 other like empowered.																																																																																																								
SIGNATURE: <i>Diana L. Starkey</i> Diana L. Starkey <i>3/2/06</i> <i>386-258-7788</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																																																																																																								