

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 15, 2005 8:00 am
Secretary of State

03-15-2005 90041 024 ****75.00

DOCUMENT # 719012

1. Entity Name

FELLOWSHIP IN CHRIST EVANGELISTIC
ASSOCIATION, INC.



Principal Place of Business

371871 HENRY SMITH RD.
HILLIARD FL 32046

Mailing Address

371871 HENRY SMITH RD.
HILLIARD FL 32046

2. Principal Place of Business

371 871 HENRY SMITH RD
Suite, Apt. #, etc.

3. Mailing Address

371 871 HENRY SMITH RD.
Suite, Apt. #, etc.



1st MOORE

CR2E037 (10/04)

City & State

HILLIARD FLA.

Zip

32046

Country

NASSAU

City & State

HILLIARD FLA. 32046

Zip

32046

Country

NASSAU

4. FEI Number

23-7069903

Applied For

Not Applicable

5. Certificate of Status Desired

yes

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BATTON, MARVIN E
371871 HENRY SMITH RD
HILLIARD FL 32046

7. Name and Address of New Registered Agent

Name

BATTON, MARVIN E

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

371871 HENRY SMITH RD

HILLIARD, FL 32046

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 MARVIN E BATTON

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

MAR. 9 05

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

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	P	NAME	BATTON, MARVIN E	<input type="checkbox"/> Delete
STREET ADDRESS			371871 HENRY SMITH RD	
CITY-ST-ZIP			HILLIARD FL 32046	
TITLE	S	NAME	GRIFFITH, WYNNETTE J	<input type="checkbox"/> Delete
STREET ADDRESS			3162 JAMES KENNEDY RD	
CITY-ST-ZIP			CRESTVIEW FL 32539	
TITLE	D	NAME	BATTON, TERRY B DR	<input type="checkbox"/> Delete
STREET ADDRESS			RT 3 LOT 7 SHELOME ACRE	
CITY-ST-ZIP			GEORGETOWN GA 31754	
TITLE	D	NAME	BELL, JUSTIN WIL	<input type="checkbox"/> Delete
STREET ADDRESS			2301 BELL LANE	
CITY-ST-ZIP			CALLAHAN FL 32011	
TITLE	VD	NAME	BATTON, CHARLOTTE E	<input type="checkbox"/> Delete
STREET ADDRESS			371871 HENRY SMITH RD	
CITY-ST-ZIP			HILLIARD FL 32046	
TITLE		NAME		<input type="checkbox"/> Delete
STREET ADDRESS				
CITY-ST-ZIP				

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	NAME	BATTON, MARVIN BATTON	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			371871 HENRY SMITH RD	
CITY-ST-ZIP			HILLIARD, FL 32046	
TITLE	S	NAME	GRIFFTH, WYNNETTE J	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			3162 JAMES KENNEDY RD	
CITY-ST-ZIP			CRESTVIEW FL 32539	
TITLE	D	NAME	BATTON, TERRY B DR	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			RT 3 LOT 7 SHELOME ACRE	
CITY-ST-ZIP			GEORGETOWN GA 31754	
TITLE	D	NAME	BELL, JUSTIN WIL	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			2301 BELL LANE	
CITY-ST-ZIP			CALLAHAN FL 32011	
TITLE	VD	NAME	BATTON, CHARLOTTE E	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			371871 HENRY SMITH RD	
CITY-ST-ZIP			HILLIARD FL 32046	
TITLE		NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS				
CITY-ST-ZIP				

12. I hereby certify that the information supplied with this filing does not qualify 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 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: MARVIN E BATTON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MAR. 9 05

Date

904 845-2904

Daytime Phone #