

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

06 AUG 16 PM 4:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 719667

1. Entity Name
THE FIRST BETHLEHEM BAPTIST MISSIONARY
ASSOCIATION, INC.



Principal Place of Business
1729 MARTIN LUTHER KING, JR. BLVD.
TALLAHASSEE, FL 32301

Mailing Address
1729 MARTIN LUTHER KING, JR. BLVD.
TALLAHASSEE, FL 32301



08162006 No Chg-NP

CR2E037 (4/06)

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4. FEI Number
59-3029117

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DUVAL, JAMES B
2320 AJAX ROAD
TALLAHASSEE, FL 32311

**DO NOT WRITE
IN THIS SPACE**

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME DUVAL, JAMES B
STREET ADDRESS 2320 AJAX ROAD
CITY-ST-ZIP TALLAHASSEE, FL 32311

TITLE V
NAME BOONE, H.J. SR.
STREET ADDRESS 2346 S.W. 3RD STREET
CITY-ST-ZIP OCALA, FL 34474

TITLE VD
NAME RILEY, CRAIG P JR.
STREET ADDRESS 866 GOLDEN STREET
CITY-ST-ZIP TALLAHASSEE, FL

TITLE S
NAME MONTGOMERY, IZELL JR.
STREET ADDRESS 374 S. MYRTLE STREET
CITY-ST-ZIP PERRY, FL 32347

TITLE D
NAME GRIMMAGE, GEORGE
STREET ADDRESS 9225 97TH LANE
CITY-ST-ZIP LIVE OAK, FL 32060

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

100079054081
08/23/06--01030--023 **70.00

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IN THIS SPACE**

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:

James B. Duval
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James B. Duval

8/4/2006

850 878-9613

Date

Daytime Phone #