2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#721301

FILED Apr 19, 2005 Secretary of State

Entity Name: FIRST BAPTIST CHURCH OF GAINESVILLE, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
	IVERSITY AVE LLE, FL 32601				
Current Mailing Address:			New Mailir	New Mailing Address:	
	IVERSITY AVE LLE, FL 32601				
FEI Number:	59-0782446	FEI Number Applied For()	FEI Number Not Appli	cable () Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and	Address of New Registered Agent:	
4700 N.W. GAINESVII	FRANK JR 16 PLACE LLE, FL 32601		ournose of changing it	s registered office or registered agent, or both,	
	of Florida.	submits this statement for the p	dipose of changing it	s registered office of registered agent, or both,	
SIGNATUF	RE:				
	Electror	nic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () DENHAM, FRAI 4700 N.W. 16 F GAINESVILLE,	PLACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (X BALLOON, SUS 6506 NW 56TH GAINESVILLE,	LANE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VTR () WEIDLER, PHI 2025 NW 20 LN GAINESVILLE,	1	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TR () WILSON, HENF 11314 SW 8TH GAINESVILLE,	AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TR () SUMMERHILL, 4001 SW 78 ST GAINESVILLE,	TREET	Title: Name: Address: City-St-Zip:	TR (X) Change () Addition MOORE, JACK 7 N.W. 23RD ST GAINESVILLE, FL 32607	
Title: Name: Address: City-St-Zip:	TR () SPANGLER, H/ 3915 NW 37TH GAINESVILLE,	PL	Title: Name: Address: City-St-Zip:	()Change ()Addition	

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: JO T. WALKER, ACCOUNTANT ACCT 04/19/2005