


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2006 08:00 AM
Secretary of State

DOCUMENT # 721477 1. Entity Name THE SOUTH EBENEZER BAPTIST CHURCH OF LAUREL HILL, FLORIDA	
---	---

Principal Place of Business 8399 OLD EBENEZER RD LAUREL HILL, FL 32567	Mailing Address 8225 OLD EBENEZER RD LAUREL HILL, FL 32567
---	---

DO NOT WRITE IN THIS SPACE



04102006 No Chg-NP CR2E037 (11/05)

4. FEI Number NOT APPLICABLE	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CRAWFORD, BRUCE
8246 OLD EBENEZER RD
LAUREL HILL, FL 32567

DO NOT WRITE IN THIS SPACE

6. 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 Bruce Crawford - Registered Agent DATE 4-10-2006

Signature, typed or printed name of registered agent and the if applicable (NOTE-Registered Agent signature required when reinstating)

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
---	--

10. OFFICERS AND DIRECTORS

TITLE	TD
NAME	KING, MARY A
STREET ADDRESS	8225 OLD EBENEZER RD.
CITY-ST-ZIP	LAUREL HILL, FL 32567
TITLE	SD
NAME	CATO, VIRGINIA S
STREET ADDRESS	8279 OLD EBENEZER RD.
CITY-ST-ZIP	LAUREL HILL, FL 32567
TITLE	PDD
NAME	CRAWFORD, BRUCE
STREET ADDRESS	8246 OLD EBENEZER RD
CITY-ST-ZIP	LAUREL HILL, FL 32567
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000505232
04/26/06-80110-001 61.25

DO NOT WRITE 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: Mary A King Mary A. King DATE 4-10-06 DAYTIME PHONE # 850-682-2708

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR