

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721541

FILED
Apr 12, 2006
Secretary of State

Entity Name: FIRST BAPTIST CHURCH OF ALTOONA, FLORIDA, INC.

Current Principal Place of Business:

42226 SR 19
P.O. BOX 97
ALTOONA, FL 32702

New Principal Place of Business:

Current Mailing Address:

42226 SR 19
P.O. BOX 97
ALTOONA, FL 32702

New Mailing Address:

FEI Number: 59-2126039

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KELLEY, KEN DR.
18712 CR 42/ PO BOX 1298
ALTOONA, FL 32702 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: M () Delete
Name: KELLEY, KEN DR
Address: 18712 CR 42/PO BOX 1298
City-St-Zip: ALTOONA, FL 32702

Title: T () Delete
Name: COLLIER, EDWARD
Address: 42337 BIG OAK ROAD
City-St-Zip: ALTOONA, FL 32702

Title: D () Delete
Name: HUDSON, ALAN
Address: 42540 BIG OAK RD
City-St-Zip: ALTOONA, FL 32702

Title: T () Delete
Name: HOSKINS, LYNN
Address: 535 W OCALA ST
City-St-Zip: UMATILLA, FL 32784

Title: T () Delete
Name: HOSIER, JOYCE
Address: 71 OUTLOOK ST.
City-St-Zip: UMATILLA, FL 32784

Title: T () Delete
Name: JOHNSON, RUBY
Address: PO BOX 117
City-St-Zip: ALTOONA, FL 32702

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: PAUL, HASLETT
Address: 45626 STATE ROAD 19
City-St-Zip: ALTOONA, FL 32702

Title: D (X) Change () Addition
Name: GARRY, HIRSCH
Address: 66 ROSE STREET
City-St-Zip: UMATILLA, FL 32784

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: ALAN, HUDSON
Address: 42540 BIG OAK ROAD
City-St-Zip: ALTOONA, FL 32702

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: KEN KELLEY, PASTOR

DR

04/12/2006

Electronic Signature of Signing Officer or Director

Date