

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724370

FILED
Apr 19, 2006
Secretary of State

Entity Name: FIRST BAPTIST CHURCH OF FLORAL CITY, INC.

Current Principal Place of Business:

8545 EAST MAGNOLIA ST.
PO BOX 114
FLORAL CITY, FL 32636

New Principal Place of Business:

Current Mailing Address:

8545 EAST MAGNOLIA ST.
PO BOX 114
FLORAL CITY, FL 32636

New Mailing Address:

FEI Number: 59-1757718 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

THOMPSON, ROY M REV.
8960 E JEFFERSON ST
FLORAL CITY, FL 34436 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: V () Delete
Name: WOOD, JESSE
Address: 8540 EAST MOONRISE LANE
City-St-Zip: FLORAL CITY, FL 34436

Title: SD () Delete
Name: CHISMAN, JENNIFER
Address: 9480 E. TSALA APOPKA DR
City-St-Zip: FLORAL CITY, FL 34436

Title: D () Delete
Name: HIBBARD, PHILLIP
Address: PO BOX 872
City-St-Zip: FLORAL CITY, FL 34436

Title: D () Delete
Name: WAYBRIGHT, MERRY
Address: 12963 S. BETTY POINT
City-St-Zip: FLORAL CITY, FL 34436

Title: TD () Delete
Name: HANNIE, STEVE
Address: 9480 E TSALA APOPKA DR
City-St-Zip: FLORAL CITY, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: HIBBARD, RICHARD JR.
Address: 9016 S. WATERVIEW DR.
City-St-Zip: FLORAL CITY, FL 34436

Title: S (X) Change () Addition
Name: WAYBRIGHT, MERRY
Address: 12963 S. BETTY POINT
City-St-Zip: FLORAL CITY, FL 34436

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

Title: D (X) Change () Addition
Name: WAYBRIGHT, JIMMY
Address: 12963 S. BETTY POINT
City-St-Zip: FLORAL CITY, FL 34436

Title: T/D (X) Change () Addition
Name: HANNIE, STEVE
Address: 9480 E TSALA APOPKA DR
City-St-Zip: FLORAL CITY, FL 34436

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: STEVE HANNIE

T/D

04/19/2006

Electronic Signature of Signing Officer or Director

_____ Date