

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724385

FILED  
Apr 21, 2005  
Secretary of State

**Entity Name:** KING'S BAPTIST CHURCH, INCORPORATED

**Current Principal Place of Business:**

3235 58TH AVE.  
VERO BEACH, FL 32966

**New Principal Place of Business:**

**Current Mailing Address:**

3235 58TH AVE.  
VERO BEACH, FL 32966

**New Mailing Address:**

**FEI Number:** 59-1713997

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

VICKERY, JOHN R PASTOR  
379 53RD CIRCLE  
VERO BEACH, FL 32968 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: CC ( ) Delete  
Name: YON, MARY,  
Address: 8745 24TH STREET  
City-St-Zip: VERO BEACH, FL

Title: T ( ) Delete  
Name: GILBERT, VIRGINIA  
Address: 2244 1ST PLACE SW  
City-St-Zip: VERO BEACH, FL 32962

Title: T ( ) Delete  
Name: JOHNSON, LARRY  
Address: 1025 34TH AVE  
City-St-Zip: VERO BEACH, FL 32962

Title: PD (X) Delete  
Name: VICKERY, RUSSELL,  
Address: 379 53RD CIRCLE  
City-St-Zip: VERO BEACH, FL 32968

Title: CT ( ) Delete  
Name: HAILEY, JANE  
Address: 2446 18TH AVE  
City-St-Zip: VERO BEACH, FL 32960

Title: S (X) Delete  
Name: MARCIANO, FRANCES  
Address: 771 24TH SQUARE  
City-St-Zip: VERO BEACH, FL 32962

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: T (X) Change ( ) Addition  
Name: THOMPSON, GABLE  
Address: 4555 51ST AVENUE  
City-St-Zip: VERO BEACH, FL 32967

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

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

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

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

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: JOHN R VICKERY

PD

04/21/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date