2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## Feb 12, 2004 8:00 am **DOCUMENT # 725966 Secretary of State** 1. Entity Name 02-12-2004 90038 008 \*\*\*\*61.25 FAITH BAPTIST CHURCH, INC. OF ZEPHYRHILLS, **FLORIDA** Principal Place of Business Mailing Address 38634 HWY 54 EAST ZEPHYRHILLS FL 33540 38634 HWY 54 EAST **14014101** ZEPHYRHILLS FL 33540 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) City & State City & State Applied For 4. FEI Number 59-1461206 Not Applicable Country Country \$8.75 Additional 33542 33542 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WALTER, DEAN L Street Address (P.O. Box Number is Not Acceptable) 37326 RÚTLEDGE DR ZEPHYRHILLS FL 33541 Zip Code 8. 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 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 Make Check Payable to: \$5.00 May Be П Trust Fund Contribution. Florida Department of State Due By May 1, 2004 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. CD TITLE ☐ Delete TITLE ☐ Addition WALKER, WILLIAM NAME NAME 39315 NORDELL LN STREET ADDRESS STREET ADDRESS ZEPHYRHILLS FL 33540 CITY-ST-7IP CITY-ST-ZIP SD TITLE ☐ Delete TITLE ☐ Addition GRANDMASON, VAUGHAN NAME NAME 6324 INDIANA ST. STREET ADDRESS STREET ADDRESS ZEPHYRHILLS FL 33540 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Addition □ Delete ISBELL, DAVID NAME NAME 7211 OMEGA CT. STREET ADDRESS STREET ADDRESS ZEPHYRHILLS FL 33540 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change TITLE ☐ Delete TITI F ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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Changed, or on an attachment with an address, with all other like empowered.

PASTOR

PASTOR

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SIGNATURE: DIAW J. Walley DEAN L. WALTER 1/27/44 782-0880

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dayting Phone #

12. I hereby certify that the information supplied with this filing does not qualify 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 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