

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

FILED
Mar 15, 2004 8:00 am
Secretary of State

03-15-2004 90070 026 ****61.25



DOCUMENT # 726170

1. Entity Name

FIRST BAPTIST CHURCH OF CHARLOTTE HARBOR, INC.

Principal Place of Business

4506 CHURCH ST.
CHARLOTTE HARBOR FL 33980

Mailing Address

4506 CHURCH ST.
CHARLOTTE HARBOR FL 33980

2. Principal Place of Business

4506 CHURCH ST.

Suite, Apt. #, etc.

3. Mailing Address

4506 CHURCH ST.

Suite, Apt. #, etc.



MOORE CR2E037 (11/03)

City & State

CHARLOTTE HARBOR, FL

Zip 33980
Country CHARLOTTE

City & State

CHARLOTTE HARBOR, FL

Zip 33980
Country CHARLOTTE

4. FEI Number

59-0412290

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MCNEILL, GEORGE T
3810 BARNEGAT DR
PUNTA GORDA FL 33950

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE CDT Delete
NAME ADDISON, GLYNN SR.
STREET ADDRESS PO BOX 495172
CITY-ST-ZIP PORT CHARLOTTE FL

TITLE CDT Delete
NAME EASTMAN, EDWARD SR.
STREET ADDRESS 873 WEST TARPON BLVD.
CITY-ST-ZIP PORT CHARLOTTE FL 33952

TITLE T Delete
NAME MCNEILL, GEORGE T
STREET ADDRESS 3810 BARNEGAT DR.
CITY-ST-ZIP PUNTA GORDA FL 33950

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
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STREET ADDRESS
CITY-ST-ZIP

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

SIGNATURE:

George T. McNeill
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-11-04

Date

941-575-2560

Daytime Phone #