


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2004 08:00 A
Secretary of State

DOCUMENT # 729465
 1. Entity Name
NASSAU BAPTIST TEMPLE, INCORPORATED



Principal Place of Business Mailing Address
 464069 SR 200 464069 SR 200
 YULEE, FL 32097 US YULEE, FL 32097 US



01062004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
 59-1812802 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 BLANKENSHIP, TRUMAN L III
 1837 RADDIN RD
 YULEE, FL 32097

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VP
NAME	MOUGHTON, ROBERT
STREET ADDRESS	98725 BLACKROCK RD
CITY-ST-ZIP	YULEE, FL 32097
TITLE	SD
NAME	JONES, WILLY
STREET ADDRESS	88731 BLACKROCK RD
CITY-ST-ZIP	YULEE, FL 32097
TITLE	D
NAME	BRYANT, DANNY
STREET ADDRESS	3879 CREWS CREEK RD
CITY-ST-ZIP	YULEE, FL 32097
TITLE	P
NAME	BLANKENSHIP, TRUMAN L III
STREET ADDRESS	1837 RADDIN RD
CITY-ST-ZIP	YULEE, FL 32097
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 01/13/04-80045-005 70.00

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: *Truman L. Blankenship III* Truman L. BLANKENSHIP III 1-06-04 904-264-4888

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #