2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2006 08:00 AM
Secretary of State

DOCUMENT # 730481

1. Entity Name
WESTWOOD MISSIONARY BAPTIST CHURCH, INC.

Principal Place of Business	Mailing Address
3210 AVENUE G, NW WINTER HAVEN, FL 33880	3210 AVENUE G, NW WINTER HAVEN, FL 33880

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03292006 No Chg-NP CR2E037 (11/05)

4. FEI Number
59-2792064
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

NORRIS, DAVID R
112 COLEMAN RD
WINTER HAVEN, FL 33880

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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

Filing Fee is $61.25
Due by May 1, 2006

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	LANIER, REV WALTER C
STREET ADDRESS	12300 OLD GRADE RD
CITY-ST-ZIP	POLK CITY, FL 33868
TITLE	DT
NAME	NORRIS, DAVID
STREET ADDRESS	112 COLEMAN RD
CITY-ST-ZIP	WINTER HAVEN, FL
TITLE	D
NAME	WALKER, ERIC M
STREET ADDRESS	732 CREST WOOD DR.
CITY-ST-ZIP	WINTER HAVEN, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/13/06-80075-011 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: [signature] 3-29-06 (863) 299-1048
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

DAVID R. NORRIS