2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2005
Secretary of State

DOCUMENT# 731093

Entity Name: NORTHVIEW BAPTIST CHURCH OF PENSACOLA, INC.

Current Principal Place of Business:

14 STUMPFIELD RD.
PENSACOLA, FL 32503

New Principal Place of Business:

Current Mailing Address:

14 STUMPFIELD RD.
PENSACOLA, FL 32503

New Mailing Address:

FEI Number: 74-3116652 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MOTT, KEITH C
4421 BRIDGET LANE
PENSACOLA, FL 32526 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:	P	( ) Delete
Name:	MOTT, KEITH C	
Address:	4421 BRIDGET LANE	
City-St-Zip:	PENSACOLA, FL 32526	
Title:	T	( ) Delete
Name:	MOTT, JAMES	
Address:	122 CRAFT ST	
City-St-Zip:	PENSACOLA, FL 32534	
Title:	T	( ) Delete
Name:	THOMAS, JOEL	
Address:	5860 AVONDALE RD	
City-St-Zip:	PENSACOLA, FL 32526	
Title:	T	( ) Delete
Name:	FINCHER, KEN	
Address:	5218 PLATEAU RD.	
City-St-Zip:	PENSACOLA, FL 32507	
Title:	FS	(X) Delete
Name:	WOODARD, BARBARA A	
Address:	9121 AMHERST DR.	
City-St-Zip:	PENSACOLA, FL 32534	
Title:	D	( ) Delete
Name:	WOODARD, RAY A	
Address:	9121 AMHERST DR.	
City-St-Zip:	PENSACOLA, FL 32534	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:	
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: KEITH C. MOTT P 01/24/2005

Electronic Signature of Signing Officer or Director — Date