

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731482

FILED  
Jan 10, 2005  
Secretary of State

**Entity Name:** BALDWIN GRACE BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

479 NORTH CENTER STREET  
BALDWIN, FL 32234

**New Principal Place of Business:**

**Current Mailing Address:**

479 NORTH CENTER STREET  
BALDWIN, FL 32234

**New Mailing Address:**

**FEI Number:** 59-2389137

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JOWERS, DEWAYNE  
479 NORTH CENTER STREET  
BALDWIN, FL 32234 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: JOWERS, DEWAYNE  
Address: 480 N. CHESTNUT STREET  
City-St-Zip: BALDWIN FL,

Title: D ( ) Delete  
Name: ELLISON, LEROY  
Address: 817 ELLISON RD  
City-St-Zip: BALDWIN, FL

Title: D ( ) Delete  
Name: COLEMAN, JAMES JR  
Address: 20051 W. HIGHWAY 228  
City-St-Zip: JACKSONVILLE, FL

Title: T ( ) Delete  
Name: JOHNSON, PRESTON  
Address: 21 BRANDY BRANCH RD.  
City-St-Zip: BALDWIN, FL

**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:

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: DEWAYNE JOWERS

P

01/10/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date