

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732689

FILED
Apr 26, 2004
Secretary of State

Entity Name: WINTER HAVEN BAPTIST MANOR, INC.

Current Principal Place of Business:

140 AVE A SW
WINTER HAVEN, FL 33880

New Principal Place of Business:

Current Mailing Address:

140 AVE A SW
WINTER HAVEN, FL 33880

New Mailing Address:

FEI Number: 59-1609564

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DYAL, LUCIUS M JR.
501 E. KENNEDY BLVD., STE. 1400
TAMPA, FL 33602 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: PD () Delete
Name: MORTON, RICHARD W
Address: 127 PARK LANE
City-St-Zip: WINTER HAVEN, FL 33884

Title: SD () Delete
Name: BELLINGHAM, SHIRLEY
Address: 130 PATTERSON DR
City-St-Zip: AUBURNDALE, FL 33823

Title: TD () Delete
Name: MEIGS, DENNIS R
Address: 818 22ND ST NW
City-St-Zip: WINTER HAVEN, FL 33881

Title: D () Delete
Name: MIXON, MARTHA
Address: 250 LAKE LULU DRIVE
City-St-Zip: WINTER HAVEN, FL 33880

Title: VPD () Delete
Name: HERRERA, MARVIN
Address: 2019 OLIVER PLACE
City-St-Zip: WINTER HAVEN, FL 33881

Title: D () Delete
Name: GLENN, JACKY
Address: 2013 SHORELAND DR.
City-St-Zip: AUBURNDALE, FL 33823

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: RICHARD W. MORTON

PD

04/26/2004

Electronic Signature of Signing Officer or Director

Date