

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 8:00 am
Secretary of State

04-28-2008 90353 038 ****70.00

DOCUMENT # 732709 1. Entity Name WESCONNETT BAPTIST CHURCH, INC.						
Principal Place of Business 5711 WESCONNETT BLVD. JACKSONVILLE, FL 32244			Mailing Address 5711 WESCONNETT BLVD. JACKSONVILLE, FL 32244			
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.			
City & State			City & State			
Zip		Country		Zip		
Country		Country		4. FEI Number 59-6032801		
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable		
6. Name and Address of Current Registered Agent NICHOLS, FRANK 5915 BLACKTHORN ROAD JACKSONVILLE, FL 32244			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number Is Not Acceptable) City			
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
Filing Fee is \$61.25 Due by May 1, 2008			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NICHOLS, FRANK 5915 BLACKTHORN ROAD JACKSONVILLE, FL 32244	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRADLEY, CECIL H. 6117 WESCONNETT BLVD. JACKSONVILLE, FL 32244	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD DEBORDE, THOMAS 7563 WALDEN ROAD EAST JACKSONVILLE, FL 32244	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, JOHN T. 4931 WESCONNETT BLVD. JACKSONVILLE, FL 32210	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WALKER, JOHN E 6030 LYNWOOD AVE JACKSONVILLE, FL 32210	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCCLELLAN, JAMES P. 6318 CLARET DR. JACKSONVILLE, FL 32210	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BRADLEY, MARY 6117 WESCONNETT BLVD JACKSONVILLE, FL 32244	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REES, EVERETTE E., JR. 8404 THREE CREEKS BLVD. JACKSONVILLE, FL 32220	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HALL, HERBERT S 5442 MARCIA CIRCLE JACKSONVILLE, FL 32210	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COSTNER, MATTHEW W. 10237 EMMA LAKES DR. JACKSONVILLE, FL 32251	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUMGARDNER, JOSEPH 8515 TRAMBLY DRIVE SOUTH JACKSONVILLE, FL 32210	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CRANE, WILLIAM A., JR. 7594 SAN JOSE BLVD JACKSONVILLE, FL 32217	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
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: <u>Frank L. Nichols</u> Frank L. Nichols 4-23-08 542-3371 EXT 204 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>						

ATTACHMENT

40084937

#732709

WESCONNETT BAPTIST CHURCH

5711 WESCONNETT BLVD.

JACKSONVILLE, FL 32244

CONTINUATION OF BLOCK 11:

TITLE: D

☐ CHANGE ☒ ADDITION

NAME: TOWER, CLINTON R.

STREET ADDRESS: 11519 WOODGLEN WAY

CITY, STATE, ZIP: JACKSONVILLE, FL 32223