

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734224

FILED
Apr 20, 2005
Secretary of State

Entity Name: HICKS ROAD BAPTIST CHURCH, INC.

Current Principal Place of Business:

12219 HICKS ROAD
HUDSON, FL 34669

New Principal Place of Business:

Current Mailing Address:

12219 HICKS ROAD
HUDSON, FL 34669

New Mailing Address:

FEI Number: 59-2400886

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCRAY, ANDREW
10434 HAZEL AVE
HUDSON, FL 34669 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: TS () Delete
Name: NEUBERG, JOY L
Address: 7404 UNIVERSITY DRIVE
City-St-Zip: HUDSON, FL 34667

Title: T () Delete
Name: WILEY, KEN
Address: 13120 LITEWOOD R
City-St-Zip: HUDSON, FL 34669

Title: D () Delete
Name: JORDAN, PAUL
Address: 9534 FRED ST
City-St-Zip: HUDSON, FL 34669

Title: D () Delete
Name: YOUNG, DELMA L
Address: 10737 SHADY DRIVE
City-St-Zip: HUDSON, FL 34669

Title: CODP () Delete
Name: MCCRAY, ANDREW
Address: 10434 HAZEL LN.
City-St-Zip: HUDSON, FL 34669

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:

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: JOY NEUBERG

TS

04/20/2005

Electronic Signature of Signing Officer or Director

Date