2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# 740495

Entity Name: FELLOWSHIP BAPTIST CHURCH, INC.

Current Principal Place of Business:

5223 HIGHWAY 90
MILTON, FL 32571

New Principal Place of Business:

Current Mailing Address:

5223 HIGHWAY 90
MILTON, FL 32571

New Mailing Address:

FEI Number: 59-2469441 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BOWMAN, CHARLES N
5036 GUERNSEY ROAD
MILTON, FL 32571 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:	MUNOZ, FELIX	
Address:	5223 HWY 90	
City-St-Zip:	PACE, FL 32571	
Title:	S	( ) Delete
Name:	MUNOZ, DEBBIE	
Address:	5654 MILLIGAN FORD ROAD	
City-St-Zip:	MILTON, FL 32571	
Title:	TD	( ) Delete
Name:	BOWMAN, CHARLES N	
Address:	5056 GURNSEY RD.	
City-St-Zip:	MILTON, FL	
Title:	D	( ) Delete
Name:	HOUSE, TED,	
Address:	5647 CAMELLIA AVE	
City-St-Zip:	PENSACOLA, FL 32520	
Title:	D	( ) Delete
Name:	STRICKLAND, H H	
Address:	4217 QUEENS COURT	
City-St-Zip:	MILTON, 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:		
Title:	D	(X) Change ( ) Addition
Name:	STRICKLAND, H H	
Address:	4217 QUEENS COURT	
City-St-Zip:	MILTON, FL 32571	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: CHARLES N BOWMAN TD 05/01/2006
Electronic Signature of Signing Officer or Director — Date