

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2005 08:00 AM
Secretary of State

DOCUMENT # 740612

1. Entity Name
GAINESVILLE BAPTIST CHURCH, INC.



Principal Place of Business
**3570 NW 16TH BLVD
GAINESVILLE, FL 32605**

Mailing Address
**3570 NW 16TH BLVD
GAINESVILLE, FL 32605**



02142005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1773634

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**COLE, J. RONALD
2236 NW 37 PL
GAINESVILLE, FL 32605**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when terminating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
**T/D
HOMAN, RAYMOND R
2550 N W 54TH BLVD
GAINESVILLE, FL**

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
**D
BARRAM, BOB
2103 NW 36TH TERR.
GAINESVILLE, FL**

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
**D
STOUFFER, LES
8512 NW 35TH ROAD
GAINESVILLE, FL**

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
**D
ALLEN, MEL
1931 NW 55TH TERRACE
GAINESVILLE, FL 32605**

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
**P
COLE, J. RONALD
2236 NW 37 PL
GAINESVILLE, FL**

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

U00000300107
04/12/05-80008-002 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/6/05
Date

324-8914
Daytime Phone #