

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 29, 2005
Secretary of State**

DOCUMENT# 740728

Entity Name: THE FIRST BAPTIST CHURCH OF DAVENPORT, FLORIDA, INC.

Current Principal Place of Business:

MAPLE STREET WEST
PO BOX 685
DAVENPORT, FL 33837

New Principal Place of Business:

110 MAPLE STREET WEST
PO BOX 685
DAVENPORT, FL 33837

Current Mailing Address:

MAPLE STREET WEST
PO BOX 685
DAVENPORT, FL 33837

New Mailing Address:

MAPLE STREET WEST
PO BOX 685
DAVENPORT, FL 33836

FEI Number: 59-2355403 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROCKER, DAVID E.
411 NORTH BLVD. W.
DAVENPORT, FL 33837 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: DP () Delete
Name: ROCKER, DAVID E.,
Address: 411 NORTH BLVD W.
City-St-Zip: DAVENPORT, FL

Title: DV () Delete
Name: SMITH, STEVE
Address: 116 TERRACE DR
City-St-Zip: HAINES CITY, FL 33844

Title: DS () Delete
Name: CONLEY, WENDELL,
Address: LAGO VISTA COURT
City-St-Zip: DAVENPORT, FL

Title: D () Delete
Name: LINDER, LEE
Address: 627 POWER LINE RD
City-St-Zip: DAVENPORT, FL

Title: DT () Delete
Name: CHUMNEY, MILDRED,
Address: EAST LEMON STREET
City-St-Zip: DAVENPORT, FL

Title: D () Delete
Name: PREVATT, SONNIE
Address: 1425 JOHNS AVENUE
City-St-Zip: HAINES CITY, FL 33844

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
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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: DAVID E ROCKER

DP

04/29/2005

Electronic Signature of Signing Officer or Director

_____ Date