2005 NOT-FOR-PROFIT CORPORATION

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

ANNUAL REPORT FILED Jan 11, 2005 08:00 AM **DOCUMENT # 741230 Secretary of State** BIBLE BAPTIST CHURCH OF ORANGE PARK, INC. Principal Place of Business Mailing Address 3060 MOODY ROAD 1380 BELLAIR BLVD. ORANGE PARK, FL 32605 P.O. BOX 607 ORANGE PARK, FL 32073-3526 US 01072005 No Chg-NP CR2E037 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-1785663 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FOWLER, PAUL C. JR. DO NOT WRITE 1380 BELLAIR BLVD. ORANGE PARK, FL 32073 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 regulred when reinstating) DATE 9. Election Campaign Financing Filing Fee is \$61.25 **\$5.00** May Be Due by May 1, 2005 Trust Fund Contribution. П Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME FOWLER, PAUL C JR STREET ADDRESS 1380 BELLAIR BLVD CITY-ST-ZIP ORANGE PARK, FL 00000, TITLE NAME BOYER, ROBERT U00000177272 01/11/05-80030-010 61.25 STREET ADDRESS 316 COTTONWOOD LANE CITY-ST-ZIP ORANGE PARK, FL TITLE NAME MICHAEL, CHARLES E STREET ADDRESS 2649 ELBOW RD DO NOT WRITE CITY-ST-ZIP ORANGE PK, FL IN THIS SPACE TITLE NAME LITZELMAN, GERALD G. STREET ADDRESS 440 JEFFERSON AVE CITY-ST-ZIP ORANGE PARK, FL 00000, TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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