

**2007 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**

**Feb 19, 2007 08:00 AM  
Secretary of State**

**DOCUMENT # 742138**

1. Entity Name  
**MAIN STREET BAPTIST CHURCH, BARTOW, FLORIDA,  
INC.**



Principal Place of Business  
**1140 EAST MAIN STREET  
BARTOW, FL 33830**

Mailing Address  
**1140 EAST MAIN STREET  
BARTOW, FL 33830**



01082007 No Chg-NP

CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-1642132**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**TOMPKINS, DON  
695 S. SANFORD  
BARTOW, FL 33830**

**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 reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D GRUBBS, CLARENCE L., JR 195 MYRTLE STREET BARTOW, FL
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	SD MEEKS, RALPH 655 PARK LANE BARTOW, FL
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD TOMPKINS, DON 695 S SANFORD BARTOW, FL 33830
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U00000642212  
03/01/07-80033-015 61.25

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:** Ralph Meeks, Jr Ralph Meeks, Jr 12-4-7 863-533-8990  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #