

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2004 8:00 am
Secretary of State

04-14-2004 90020 021 ****61.25

DOCUMENT # 742242

1. Entity Name
FIRST BAPTIST CHURCH OF LEESBURG, INC.



Principal Place of Business
**220 NORTH 13TH STREET
LEESBURG, FL 34748**

Mailing Address
**220 NORTH 13TH STREET
LEESBURG, FL 34748**

04032880



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04082004 Chg-NP CR2E037 (10/03)

4. FEI Number
59-0637837

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BLANCHARD, JUDY
220 NORTH 13TH ST.
LEESBURG, FL 34748**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 reappointing)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PT
NAME CUMMINS, NORMAN ☐ Delete
STREET ADDRESS 16400 LAKE SHORE DRIVE
CITY-ST-ZIP CLERMONT, FL 347119464

TITLE T ☐ Change ☒ Addition
NAME AYRIS, ARTHUR
STREET ADDRESS 4420 Bay Forest Lane
CITY-ST-ZIP FRUITLAND PARK, FL 34731

TITLE T ☐ Delete
NAME WALKER, JAMES M.
STREET ADDRESS 1009 COTTONWOOD
CITY-ST-ZIP LEESBURG, FL 34748

TITLE T ☒ Change ☐ Addition
NAME WALKER, JAMES
STREET ADDRESS 5634 Austin St
CITY-ST-ZIP Leesburg, FL 34748

TITLE S ☐ Delete
NAME BAKER, PEGGY A
STREET ADDRESS 2341 CONESTOGA DR
CITY-ST-ZIP LEESBURG, FL 34748

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☒ Delete
NAME TEAGUE, GARY
STREET ADDRESS 2306 QUEEN PALM CT.
CITY-ST-ZIP LEESBURG, FL 34748

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VT ☒ Delete
NAME HOBBY, KENNETH
STREET ADDRESS 41317 SILVER DR.
CITY-ST-ZIP UMATILLA, FL 32784

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE AS ☐ Delete
NAME BLANCHARD, JUDY
STREET ADDRESS 220 N. 13TH ST
CITY-ST-ZIP LEESBURG, FL 34748

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Judy Blanchard
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/04

352-787-1085

Date

Daytime Phone #