

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 27, 2006 08:00 AM
Secretary of State

DOCUMENT # 742242 1. Entity Name FIRST BAPTIST CHURCH OF LEESBURG, INC.	
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Principal Place of Business 220 NORTH 13TH STREET LEESBURG, FL 34748	Mailing Address 220 NORTH 13TH STREET LEESBURG, FL 34748
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01192008 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FBI 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 BLANCHARD, JUDY 220 NORTH 13TH ST. LEESBURG, FL 34748
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2006**

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	PT CUMMINS, NORMAN 16400 LAKE SHORE DRIVE CLERMONT, FL 347119484
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WALKER, JAMES M. 5634 AUSTIN ST LEESBURG, FL 34748
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BAKER, PEGGY A 2341 CONESTOGA DR LEESBURG, FL 34748
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T AYRIS, ARTHUR 4420 BAY FOREST LANE FRUITLAND PARK, FL 34731
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS BLANCHARD, JUDY 220 N. 13TH ST LEESBURG, FL 34748
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000538067
05/09/06-80024-025 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: Judy Blanchard 5/1/06 352-735-0117
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #