

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 26, 2006 08:00 AM
Secretary of State

DOCUMENT # 742876

1. Entity Name
STATE HIGHWAY BAPTIST CHURCH, INC.



Principal Place of Business
5502 BAPTIST CHURCH RD.
TAMPA, FL 33610

Mailing Address
5502 BAPTIST CHURCH RD.
TAMPA, FL 33610



02262006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 50-0514223	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DAMRON, JOHN
902 STRAWBERRY LANE
BRANDON, FL 33511

**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 _____ (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	D
NAME	STEFFEN, DAVID
STREET ADDRESS	4725 PRESIDENTIAL ST
CITY-ST-ZIP	SEFFNER, FL 33584
TITLE	D
NAME	ANDREWS, FRED
STREET ADDRESS	11028 CIRCLE 'S' RD
CITY-ST-ZIP	SEFFNER, FL 33584
TITLE	S
NAME	RITCH, DELORES
STREET ADDRESS	6027 WILLIAMS RD
CITY-ST-ZIP	SEFFNER, FL 33584
TITLE	T
NAME	WARREN, ALAN
STREET ADDRESS	6707 STAFFORD RD
CITY-ST-ZIP	PLANT CITY, FL 33565
TITLE	PD
NAME	DAMRON, JOHN
STREET ADDRESS	902 STRAWBERRY LANE
CITY-ST-ZIP	BRANDON, FL 33511
TITLE	D
NAME	WELLER, BECKY
STREET ADDRESS	1319 PEACHFIELD DR
CITY-ST-ZIP	VALRICO, FL 33594

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05/08/06-80026-017 61.25

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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: Alan Warren / Alan Warren 4/23/06 (813) 986-1040
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #