
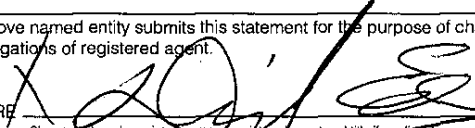
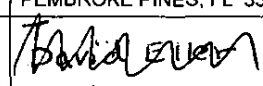
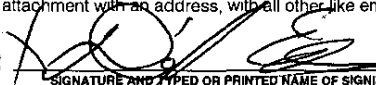


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90444 042 ****61.25

| | | | | | |
|---|---|--|---|--|--|
| DOCUMENT # 743764 1. Entity Name FIRST BAPTIST CHURCH OF DEERFIELD BEACH, INC. | | | |  | |
| Principal Place of Business 701 N.E. 2ND STREET DEERFIELD BEACH, FL 33441 | | | Mailing Address 701 N.E. 2ND STREET DEERFIELD BEACH, FL 33441 | | |
| 2. Principal Place of Business Suite, Apt. #, etc. | | | 3. Mailing Address Suite, Apt. #, etc. | | |
| City & State | | | City & State | | |
| Zip | | Country | | Zip | |
| Country | | Country | | 4. FEI Number 59-0806969 | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | | | Applied For Not Applicable | |
| 6. Name and Address of Current Registered Agent DEVITT, MARK 612 SE 7TH AVE DEERFIELD BEACH, FL 33441 | | | | 7. Name and Address of New Registered Agent Name David Eller Street Address (P.O. Box Number is Not Acceptable) 281 SE 18th Ave Deerfield Beach, City FL Zip Code 33441 | |
| 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  <small>Signature, typed or printed name of registered agent and title if applicable.</small> | | | | Trustee 4/29/04 <small>(NOTE: Registered Agent signature required when reinstating)</small> DATE | |
| Filing Fee is \$61.25 Due by May 1, 2004 | | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | | \$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 NAME STREET ADDRESS CITY-ST-ZIP | T DUGMORE, KEN 904 SE 15TH CT DEERFIELD BEACH, FL 33441 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | T David Eller 281 SE 18th Ave Deerfield Beach, FL 33441 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T CRAIG, ROY C 6000 NW 43RD TERR COCONUT CREEK, FL 33073 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | T Bruce Magee 1536 SE 15th Ct, Unit 601 Deerfield Beach, FL 33441 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T CAGLE, CLEATUS 448 NE 8TH TERR DEERFIELD BCH, FL 33486 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T DEVITT, MARK 612 SE 7TH AVE DEERFIELD BEACH, FL 33441 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T WILSON, LARRY 9611 NW 4 ST. PEMBROKE PINES, FL 33024 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP |  | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 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:  | | | | David Eller 4/29/04 954-427-1216 <small>Signature and typed or printed name of signing officer or director Date Daytime Phone #</small> | |