

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2008 8:00 am
Secretary of State

01-29-2008 90028 018 ****61.25

DOCUMENT # 746956

1. Entity Name
BILLORY BAPTIST CHURCH, HOLLEY-NAVARRE, INC.



Principal Place of Business
8162 STILLWATER COVE
NAVARRE, FL 32566-6407

Mailing Address
8162 STILLWATER COVE
NAVARRE, FL 32566-6407

4000



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01222008 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
59-1786306

Applied For
Not Applicable

Zip

Country

Zip

Country

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

KNIGHT, MICHAEL V
7843 PLEASANT OAK AVE
NAVARRE, FL 32566

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 reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

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

TITLE PD ☐ Delete
NAME KNIGHT, MICHAEL V
STREET ADDRESS 7843 PLEASANT OAK AVE
CITY-ST-ZIP NAVARRE, FL 32566

TITLE VD ☐ Delete
NAME FLODA, JERRY
STREET ADDRESS 2763 MUMFIELD DRIVE
CITY-ST-ZIP NAVARRE, FL 32566

TITLE TD ☒ Delete
NAME STEPHENS, ALICE
STREET ADDRESS 8253 BELEZA ST
CITY-ST-ZIP NAVARRE, FL 32566

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP *Michael V Knight*

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

TITLE TD ☒ Change ☐ Addition
NAME Wendy Lincoln
STREET ADDRESS 2813 Dtt Howell
CITY-ST-ZIP Navarre, FL 32566

TITLE Sec ☐ Change ☒ Addition
NAME Supinger, Patricia L.
STREET ADDRESS 3991 Ward Basin Rd
CITY-ST-ZIP Milton, FL 32583

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

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 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:

Michael V Knight
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/24/2008 939-2849
Date Daytime Phone #