


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2006 08:00 AM
Secretary of State

DOCUMENT # 747093
 1. Entity Name
FIRST BAPTIST CHURCH OF CROOM-A-COOCHIE, INC.



Principal Place of Business 10926 S US HWY 301 WEBSTER, FL 33597	Mailing Address ROUTE 301, SOUTH P.O. BOX 758 BUSHNELL, FL 33513
--	---



01152006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1581268	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
BABBITT, KENNETH
RT 1, BOX 134
LAKE PANASOFFKEE, FL 33538

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 NAME STREET ADDRESS CITY-ST-ZIP	TD LAMB, GENE RT 1 BOX 40L CR 654 BUSHNELL, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BABBITT, KENNETT MAGNOLIA AVE. CENTER HILL, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WALLACE, GLENDA OSCEOLA ST CENTER HILL, FL 00000,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LAMB, LINDA RT 1 BOX 40 L CR 654 BUSHNELL, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WALLACE, TIM 11849 CR 727 WEBSTER, FL 33597
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

11100390448
 01/23/06-80028-011 \$1.25

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: Tim Wallace Tim Wallace 1/15/06 352-303-3575
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #