## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Jan 27, 2006 8:00 am Secretary of State

DOCUMENT # 748955  1. Entity Name RICHMOND AVENUE BAPTIST CHURCH, INC.							01-27-2006 90043 025 ****61.25					
Principal Place of Business 304 N. RICHMOND AVE. LEHIGH ACRES, FL 33972-5053 US  Mailing Address 304 N. RICHMOND AVE. LEHIGH ACRES, FL 33936					us							
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2. Principal F	Place of Business	3. Mailing Address					<b>1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 </b>	ALIA BUDUH AKAH BA		HILL BLIE <b>k</b> i		
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.				01122006	Chg-NP	CR2E0	37 (11/05)			
City & State		City & State					4. FEI Numbe 59-280			_ <u> </u>	plied For t Applicable	
Zip	Zip Country		Zip				5. Certificate	of Status Desired		\$8.75 Add Fee Required		
	6. Name and Address of Current	Registered	Agent		Name		7. Name and	Address of New	Registered	Agent		
MILES, GEORGE							OSWALT, LYDIA					
20 <del>6 6TH ST E   LEHIGH ACRES, FL 33936   LEHIGH ACRES, FL 33936   LEHIGH ACRES, FL 33936   LEHIGH ACRES   LEHIG</del>					Street A	ddress (I	P.O. Box Numbe	r is Not Acceptal	ole)			
LETIIGHT ACKES, FL 33836						707	ARI	ANNE	CT			
					City	4.5		res	FL	Zip Code	 چُ ۶/	
	named entity submits this statement for	or the purpose	e of changing its	register	ed office o	r register	ed agent, or bot	h, in the State of	Florida, I am		1 40	
the obligat	tions of registered agent.											
SIGNATURE	Ludica Va	N and	//					1-2	5- D	4		
	Signature typed or printed name of registered agen	t and title if applica	ble. (NOT	E: Registere	d Agent signat	ture required	when reinstating)		DATE '			
	Signature/spec or printed name of registered agen Filling Fee is \$61.25 Due by May 1, 2006	t and title if applica	9. Election Car Trust Fund 0	mpaign F	inancing	ture required	\$5.00 May B Added to Fees	9	Make chec	k payable to		
10.	Filing Fee is \$61.25		9. Election Car	mpaign F Contribut	inancing ion.		\$5.00 May B Added to Fees	9	Make chec orida Depar	k payable to	tate	
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14. I nereby certify that the information supplied with this filling 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:

SIGNAQUIRE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-25-66

369-5555