

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759097

FILED
Feb 07, 2006
Secretary of State

Entity Name: GREEN POND BAPTIST CHURCH, INC.

Current Principal Place of Business:

5995 GREEN POND CHURCH RD
POLK CITY, FL 33868 US

New Principal Place of Business:

Current Mailing Address:

5995 GREEN POND CHURCH RD
POLK CITY, FL 33868 US

New Mailing Address:

FEI Number: 59-2746033

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOYETT, WAYNE DALE
6550 PA'S LANE
POLK CITY, FL 33868 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: SAPP, THERESA
Address: 6040 POYNER RD
City-St-Zip: POLK CITY, FL 33868

Title: D () Delete
Name: BEDFORD, JEFF
Address: 17931 COMMONWEALTH AVE N.
City-St-Zip: POLK CITY, FL 33868

Title: D () Delete
Name: MILLER, DONALD
Address: 6812 FLANDERS STATION DR
City-St-Zip: POLK CITY, FL 33868

Title: D () Delete
Name: BOYETT, TEX,
Address: 5829 SR 33
City-St-Zip: CLERMONT, FL

Title: S () Delete
Name: MASSEY, FRIEDA
Address: 210 LA COMBEE DRIVE
City-St-Zip: POLK CITY, FL 33868

Title: D () Delete
Name: WREN, DAVID
Address: 17476 COMMONWEALTH AVE N.
City-St-Zip: POLK CITY, FL 33868

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: C (X) Change () Addition
Name: MASSEY, FRIEDA
Address: 210 LA COMBEE DRIVE
City-St-Zip: POLK CITY, FL 33868

Title: D (X) Change () Addition
Name: WREN, PAUL
Address: 17476 COMMONWEALTH AVE N.
City-St-Zip: POLK CITY, FL 33868

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THERESA M. SAPP

T

02/07/2006

Electronic Signature of Signing Officer or Director

Date