2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762451

FILED Mar 30, 2006 Secretary of State

Entity Name: NORTHSIDE BAPTIST CHURCH OF NORTH FORT MYERS, FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

8250 LITTLETON RD

NORTH FORT MYERS, FL 33903

Current Mailing Address: New Mailing Address:

8250 LITTLETON RD

NORTH FORT MYERS, FL 33903

FEI Number: 59-2183842 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MOODY, DAVID JR
622 NE 15TH CT.
MOODY, DAVID JR
7900 DENI DRIVE

FORT MYERS, FL 33908 US NORTH FORT MYERS, FL 33917 US

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: 03/30/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: PD (X) Change () Addition

Name: MOODY, DAVID JR. Name: MOODY, DAVID JR. Address: 3437 NW 19TH TERR. Address: 7900 DENI DRIVE

City-St-Zip: CAPE CORAL, FL 33993 City-St-Zip: NORTH FORT MYERS, FL 33917

Title: SD () Delete Title: () Change () Addition

Name: POSTORINO, KIMBERLY Name:
Address: 62 VANS DR. Address:

Address: 62 VANS DR. Address: City-St-Zip: NORTH FORT MYERS, FL 33903 City-St-Zip:

Title: TD () Delete Title: TD (X) Change () Addition

 Name:
 RYLE, BILL
 Name:
 TARWID, EUGENE

 Address:
 2017 NW 17TH TERR.
 Address:
 3071 SKY VILLA LANE

 City-St-Zip:
 CAPE CORAL, FL 33993
 City-St-Zip:
 NORTH FORT MYERS, FL 33903

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: DAVID C. MOODY JR PD 03/30/2006