## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#764192** 

FILED Jul 12, 2006 Secretary of State

Entity Name: NARCOOSSEE BAPTIST CHURCH, INC. **Current Principal Place of Business: New Principal Place of Business:** 870 N. NARCOOSSEE RD. ST. CLOUD, FL 34771 **Current Mailing Address: New Mailing Address:** 870 N. NARCOOSSEE RD. ST. CLOUD, FL 34771 FEI Number: 59-1985825 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STEELE, DAVID A 810 N NÁRCOOSSEE RD US SAINT CLOUD, FL 34771 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete RIEMERSMA, PAUL R WOODFORD, HARRY Name: Name: 5171 COUNTRYSIDE CT. Address: 1619 FLORIDA AVE. Address: City-St-Zip: SAINT CLOUD, FL 34771 City-St-Zip: SAINT CLOUD, FL 34769 Title: Title: (X) Change ( ) Addition ( ) Delete Name: SHINDOLL, GARY Name: WALKER, AARON J Address: 4220 HICKORY TREE RD Address: 1118 MINNESOTA AVE City-St-Zip: SAINT CLOUD, FL 34772 City-St-Zip: SAINT CLOUD, FL 34769 Title: () Delete Title: (X) Change ( ) Addition PUCKETT, TRAVIS BEHRENDT, ROBERT Name: Name: Address: 3031 DILLMAN DR. Address: 5620 LAKE LIZZIE DR. City-St-Zip: SAINT CLOUD, FL 34769 City-St-Zip: ST. CLOUD, FL 34771 Title: PD () Delete Title: () Change () Addition Name: STEELE, DAVID A Name: Address: 810 N NARCOOSSEE RD Address: City-St-Zip: ST. CLOUD, FL 34771 City-St-Zip: Title: Title: () Delete () Change () Addition GIBBS, GEORGE Name: Name: 5152 BOGGY CREEK RD., P-31 Address: Address: City-St-Zip: SAINT CLOUD, FL 34771 City-St-Zip:

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 A. STEELE PD 07/12/2006