

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 28, 2006 8:00 am
Secretary of State

03-28-2006 90127 038 ****61.25

DOCUMENT # 765868

1. Entity Name

SEBASTIAN RIVER BAPTIST CHURCH, INC.



Principal Place of Business

% EDWIN CREEL
1117 US 1
SEBASTIAN FL 32958

Mailing Address

% EDWIN CREEL
1117 US 1
SEBASTIAN FL 32958



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E037 (10/05)

Zip

Country

Zip

Country

4. FEI Number

59-2400334

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CREEL, EDWIN
2835 N. HWY A1A
INDIALANTIC FL 32903

7. Name and Address of New Registered Agent

Name *Loudermilk, Gordon Oscar*

Street Address (P.O. Box Number Not Acceptable)

126th Ave.

City

Fellsmere

FL

Zip Code

32983

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.

Oscar & Loudermilk

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

3-20-06

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE **P** ☒ Delete
NAME CREEL, EDWIN
STREET ADDRESS 2835 N HWY A1A
CITY-ST-ZIP INDIALANTIC FL 32903

TITLE **V** ☒ Delete
NAME CREEL, YEVON
STREET ADDRESS 2835 N. HWY A1A
CITY-ST-ZIP INDIALANTIC FL 32903

TITLE **S** ☐ Delete
NAME WILCOX, AGNES
STREET ADDRESS 697 S WINBROW DRIVE
CITY-ST-ZIP SEBASTIAN FL 32958

TITLE **D** ☒ Delete
NAME LOUDERMILK, GORDON
STREET ADDRESS 9305 126TH AVENUE
CITY-ST-ZIP FELLSMERE FL 32948

TITLE **D** ☐ Delete
NAME FERGUSON, FREEDIA
STREET ADDRESS 578 GRACE ST
CITY-ST-ZIP SEBASTIAN FL 32958

TITLE **D** ☒ Delete
NAME PIRKE, CHARLES
STREET ADDRESS 445 SW OAK STREET
CITY-ST-ZIP SEBASTIAN FL 32958

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☒ Change ☐ Addition
NAME *Loudermilk, Gordon*
STREET ADDRESS *126th Ave.*
CITY-ST-ZIP *Fellsmere, FL 32983*

TITLE **VP** ☐ Change ☒ Addition
NAME *Loudermilk, Anna Pearl*
STREET ADDRESS *126th Ave*
CITY-ST-ZIP *Fellsmere, FL 32983*

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME *D. White, Wilma*
STREET ADDRESS *9785 57th St.*
CITY-ST-ZIP *Sebastian, FL 32985*

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME *D. Collins, Yevon*
STREET ADDRESS *558 Michael St*
CITY-ST-ZIP *Sebastian, FL 32958*

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Oscar & Loudermilk*

3-20-06