


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2004 8:00 am
Secretary of State

02-12-2004 90018 020 ****61.25

DOCUMENT # 766059					
1. Entity Name FIRST BAPTIST CHURCH, INC., OF BAKER, FLORIDA					
Principal Place of Business 1347 E 14TH ST BAKER, FL 32531 US			Mailing Address 1357 15TH ST. BAKER, FL 32531-2801 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-2116433	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
FURNER, JAY DOTSON, GLENN 1391 BUDDYS PLACE 1250 HWY. C-4A BAKER, FL 32531 BAKER, FL 32531			Name GLENN DOTSON Street Address (P.O. Box Number is Not Acceptable) 1250 HWY. C-4A City BAKER FL Zip Code 32531		
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.					
SIGNATURE: <i>Glenn Dotson</i>		(NOTE: Registered Agent signature required when reinstating)		DATE: 10 Feb 04	
Filing Fee is \$61.25 Due by May 1, 2004		9- Election Campaign Financing Trust Fund Contribution: <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	TR <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	CARR, MARVIS	NAME			
STREET ADDRESS	6161 N HWY 189	STREET ADDRESS			
CITY-ST-ZIP	BAKER, FL 32531	CITY-ST-ZIP			
TITLE	T <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	JORDAN, MARTHA C	NAME			
STREET ADDRESS	5728 HWY 4	STREET ADDRESS			
CITY-ST-ZIP	BAKER, FL 32531	CITY-ST-ZIP			
TITLE	TR <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	LANGSTON, FRANCIS D	NAME			
STREET ADDRESS	6706 OLD RIVER RD	STREET ADDRESS			
CITY-ST-ZIP	BAKER, FL 32531	CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <i>Glenn Dotson</i>		(NOTE: Registered Agent signature required when reinstating)		DATE: 10 Feb 04	
Daytime Phone #					