

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 08, 2005 8:00 am
Secretary of State

07-08-2005 90023 009 ****61.25

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1. Entity Name
FIRST FREE WILL BAPTIST CHURCH OF PALM BAY, INC.



Principal Place of Business
**7455
PALM BAY, FL 32907 US**

Mailing Address
**1181 LAMP LIGHTER DR., NW
PALM BAY, FL 32907 US**

50055292



06302005 No Chg-NP

CR2E037 (10/03)

4. FEI Number
59-3559593

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**THOMPSON, BOBBY
1398 CINDY CIR NE
PALM BAY, FL 32905**

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$81.25
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME THOMPSON, BOBBY
STREET ADDRESS 1398 CINDY CIR
CITY-ST-ZIP PALM BAY, FL 32905

TITLE V
NAME CHAPPELL, GARY
STREET ADDRESS 2129 TAPPAN ZEE LANE NE
CITY-ST-ZIP PALM BAY, FL 32905

TITLE S
NAME FANNIN, LEO
STREET ADDRESS 2318 2ND AVE SE
CITY-ST-ZIP VERO BEACH, FL 32962

TITLE T
NAME PETTY, BOBBY
STREET ADDRESS 2600 BRANDYWINE LANE
CITY-ST-ZIP PALM BAY, FL 32907

TITLE T
NAME HARRIS, DOROTHY
STREET ADDRESS 2020 HANES RD SE
CITY-ST-ZIP PALM BAY, FL 32905

TITLE T
NAME THOMPSON, BOBBY
STREET ADDRESS 1398 CINDY CIRCLE
CITY-ST-ZIP MELBOURNE, FL 32935

**DO NOT WRITE
IN THIS SPACE**

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: *Bob Thompson*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-3-05-3246765591
Date Daytime Phone #