

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

**FILED**  
**Apr 06, 2006 8:00 am**  
**Secretary of State**

04-06-2006 90030 021 \*\*\*\*61.25

**DOCUMENT # 769028**

1. Entity Name

FIRST BAPTIST CHURCH - LAKE GARFIELD, INC.



Principal Place of Business

1170 EIGHTY FOOT ROAD  
BARTOW FL 33830

Mailing Address

1170 EIGHTY FOOT ROAD  
BARTOW FL 33830



2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2388465

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

1st MOORE

CR2E037 (10/05)

6. Name and Address of Current Registered Agent

WILSON, DONALD H JR  
BOSWELL & DUNLAP, LLP  
245 SOUTH CENTRAL AVE  
BARTOW FL 33830

7. Name and Address of New Registered Agent

Name

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

City

**FL**

Zip Code

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 reconstituting)

DATE

**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 THRAILKILL, RHONDA  
STREET ADDRESS PO BOX 2652  
CITY-ST-ZIP BARTOW FL 33830

TITLE VP ☐ Delete  
NAME HICKMAN, RON  
STREET ADDRESS 215 PARKWOOD AVE  
CITY-ST-ZIP BARTOW FL 33830

TITLE T/S ☐ Delete  
NAME GANDY, IMOGENE  
STREET ADDRESS 3822 CONNERSVILLE ROAD  
CITY-ST-ZIP BARTOW FL 33830

TITLE T ☒ Delete  
NAME SMITH, DEREK  
STREET ADDRESS 505 CIPRES CIRCLE  
CITY-ST-ZIP WINTER HAVEN FL 33880

TITLE T ☐ Delete  
NAME SEGER, EDWIN  
STREET ADDRESS 4045 SNELL ROAD  
CITY-ST-ZIP BARTOW FL 33830

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

T ☒ Change ☐ Addition  
NAME Odum, Conrad  
STREET ADDRESS 865 W. McLeod St.  
CITY-ST-ZIP Bartow, FL 33830

T ☐ Change ☒ Addition  
NAME Anderson, John  
STREET ADDRESS P.O. Box 1393  
CITY-ST-ZIP Bartow, FL 33831

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

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

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

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

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: Imogene Gandy Imogene Gandy-Treasurer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

February 10, 2006 (863)533-0628

Date Daytime Phone