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

Mar 03, 2006 8:00 am Secretary of State **DOCUMENT # 770049** 1. Entity Name 03-03-2006 90123 044 ****61.25 FIRST BAPTIST CHURCH OF PARKER, INC. Principal Place of Business Mailing Address 4630 E. HWY 98 P. O. BOX 10301 PARKER FL 32404 4630 E. HWY 98 P. O. BOX 10301 PARKER FL 32404 2. Principal Place of Business 3. Mailing Address Suite. Apt. #. etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) Applied For 4. FEI Number City & State City & State 59-6020347 Not Applicable Zio Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Bright ECKER, ROBERT M Box Number is Not Acceptable) 255 ARLINGTON DRIVE PANAMA CITY FL 32404 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 _ (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW: FEE IS \$61.25 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2006 Florida Department of State Added to Fees **第一位,** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE Addition TITLE ☐ Delete ECKER, ROBERT M NAME NAME 1012 W. PARK STREET ADDRESS STREET ADDRESS PANAMA CITY FL 32404 CITY+ST-ZIP CITY - ST- 7IP ☐ Change ■ Addition TETLE ☐ Defete TITLE SHORES, JAMES D. NAME NAME 648 N. 9TH PLAZA STREET ADDRESS STREET ADDRESS PARKER, FL 32404 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE GOREY, WILLIAM N. NAME NAME STREET ADDRESS 42 WOOD AVE STREET ADDRESS CITY-ST-7IP PARKER, FL 32404 CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE WOOD, FRED NAME STREET ADDRESS STREET ADDRESS 108 N ROWE AVE CITY-ST-ZIP PANAMA CTY, FL 32401 CITY-ST-ZIP ☐ Delete Change ■ Addition TITLE SUGGS, CHESTER M NAME 4808 4TH STREET STREET ADDRESS STREET ADDRESS PANAMA CITY FL 32404 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

12. It hereby certify that the information supplied with this filling 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 trusted 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

2-10-06 (850

FILED