


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT


FILED
Apr 21, 2004 08:00 AM
Secretary of State

DOCUMENT # 771024
 1. Entity Name
FIRST BAPTIST CHURCH OF COLLIER CITY, INC.



Principal Place of Business 2651 N.W. 2 STREET POMPANO BEACH, FL 33069	Mailing Address 2651 N.W. 2 STREET POMPANO BEACH, FL 33069
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04182004 No Chg-NP CR2E037 (10/03)

4. FEI Number 41-8469972	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

WALLACE, WILLARD
 2651 N W 2ND ST
 POMPANO BEACH, FL 33069

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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 \$61.25 Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	JACKSON, CHARLIE J
STREET ADDRESS	2651 NW 2ND STREET
CITY - ST - ZIP	POMPANO BEACH, FL
TITLE	D
NAME	WALLACE, WILLARD
STREET ADDRESS	2651 NW 2ND STREET
CITY - ST - ZIP	POMPANO BEACH, FL
TITLE	TD
NAME	HOWELL, MELVIN
STREET ADDRESS	2651 NW 21ST
CITY - ST - ZIP	POMPANO BEACH, FL
TITLE	D
NAME	ALLEN, JETHRO JR.
STREET ADDRESS	2651 NW 21ST
CITY - ST - ZIP	POMPANO BEACH, FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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 04/21/04-80042-004 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 officer 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 attached sheet with an address, with all other like empowered.

SIGNATURE:  **CHARLIE J. JACKSON** Date: **4/19/04** Daytime Phone #: **954-733-5168**