


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 20, 2005 08:00 AM
Secretary of State

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



Principal Place of Business Mailing Address
2651 N.W. 2 STREET **2651 N.W. 2 STREET**
POMPANO BEACH, FL 33069 **POMPANO BEACH, FL 33069**

DO NOT WRITE IN THIS SPACE



04182004 No Chg-NP CR2E037 (10/03)

4. FEI Number
41-8469972 Applied For
 Not Applicable

5. Certificate of Status Desired **\$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 _____ DATE _____
Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating)

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 NAME STREET ADDRESS CITY - ST - ZIP	D JACKSON, CHARLIE J 2651 NW 2ND STREET POMPANO BEACH, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WALLACE, WILLARD 2651 NW 2ND STREET POMPANO BEACH, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD HOWELL, MELVIN 2651 NW 21ST POMPANO BEACH, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ALLEN, JETHRO JR. 2651 NW 21ST POMPANO BEACH, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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 07/20/05-80004-025 61.25

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 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 Charlie J. Jackson (Charlie J. Jackson) 7/18/05 (974-733-5768)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #