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

## Jul 05, 2005 8:00 am **Secretary of State** DOCUMENT # C9900000001 03-14-2005 90084 050 \*\*\*\*61.25 1. Entity Name PENSACOLA BAY BAPTIST ASSOCIATION Principal Place of Business Mailing Address DUUATION 9999 CHEMSTRAND RD 9999 CHEMSTRAND RD PENSACOLA, FL 32514 PENSACOLA, FL 32514 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 01262005 Cha-NP CR2E037 (10/03) City & State City & State 4. FEI Numbe Applied For 59-6018389 Not Applicable Zip 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 Name DANIEL, JOHN P ESQ. Street Address (P.O. Box Number is Not Acceptable) 3 WEST GARDEN STREET, SUITE 600 PENSACOLA, FL 32501 City 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 little if applicable (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$61.25 9. Election Campaign Financing **\$5.00** May Be Make check payable to Trust Fund Contribution. П Florida Department of State Due by May 1, 2005 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME RODABAUGH, REBECCA NAME 6626 CHICAGO AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SI-ZIP PENSACOLA, FL 32526 TITLE ☐ Defete TITLE ☐ Change ☐ Addition FILLINGIM, CHARLES O NAME NAME STREET ADDRESS STREET ADDRESS 6317 WHITE OAK DR PENSACOLA, FL 32503 CITY-ST-ZIP CITY-ST-ZIP TITLE ☑ Delete TITLE D Allen Townsend Change ☐ Addition MCBRIDE, GREG NAME NAME 9896 Rebel Road STREET ADDRESS 4750 S. ANFLAY FIELD RD STREET ADDRESS Pensacola FL 32526 PENSACOLA, FL 32526 CITY-ST-ZIP CiTY-ST-7IP ☐ Defete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete Channe ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-S7-ZIP CITY-ST-ZIP TITLE ☐ Change TITLE ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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12. I hereby certify that the information supplied with this filling 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:

CITY-ST-ZIP

CITY-ST-ZIP

## ATTACHMENT (06624/97 #C99 00000000/

PENSACOLA BAY BAPTIST ASSOC., INC.

9999 CHEMSTRAND ROAD PENSACOLA, FL 32514 (850) 471-3430

AMSOUTH BANK PENSACOLA, FL 32504 63-1011/632

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03/10/2005

MEMO.

PAY TO THE Florida Department of State

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**Division of Corporations** P.O. Box 1500 Tallahassee, FL 32302-1500

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