

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002321

FILED
Apr 14, 2005
Secretary of State

Entity Name: LEONIA BAPTIST CHURCH, INC.

Current Principal Place of Business:

1124 GILLMAN ROAD
WESTVILLE, FL 32464

New Principal Place of Business:

Current Mailing Address:

1124 GILLMAN ROAD
WESTVILLE, FL 32464

New Mailing Address:

FEI Number: 59-3494067

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILKERSON, ROBERT G
1589 HIGHWAY 185
WESTVILLE, FL 32464 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: WILKERSON, ROBERT G
Address: 1589 HWY 185
City-St-Zip: WESTVILLE, FL 32464

Title: T () Delete
Name: STANLEY, PERRY
Address: 1182 HWY 2
City-St-Zip: WESTVILLE, FL 32464

Title: T () Delete
Name: WYROSDICK, JOHN
Address: 2163 HORSE BARN RD.
City-St-Zip: WESTVILLE, FL 32464

Title: T () Delete
Name: LOCKE, ROBERT
Address: 1373 LINE DR.
City-St-Zip: PONCE DE LEON, FL 32455

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: STAFFORD, JIMMY
Address: 1620 HOLMES RD.
City-St-Zip: WESTVILLE, FL 32464

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT G WILKERSON

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04/14/2005

Electronic Signature of Signing Officer or Director

Date