


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2004 08:00 AM
Secretary of State

DOCUMENT # N00000003322
 1. Entity Name
 NORTH HILLIARD BAPTIST CHURCH, INC.



Principal Place of Business Mailing Address
 U.S. 1 NORTH ACROSS FROM MURHEE RD. P.O. BOX 308
 HILLIARD, FL 32046 HILLIARD, FL 32046



01242004 No Chg-NP CR2E037 (10/03)

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4. FEJ Number Applied For
 59-3015245 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 JOHNSON, CONNIE L
 108 KRISTI CIRCLE
 HILLIARD, FL 32046

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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: *Connie L. Johnson*
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning) DATE

Filing Fee is \$81.25 Due by May 1, 2004 9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	T
NAME	VANZANT, FLOYD
STREET ADDRESS	7668 W CR 108
CITY - ST - ZIP	HILLIARD, FL 32046
TITLE	T
NAME	JOHNSON, CONNIE L
STREET ADDRESS	108 KRISTI CIRCLE
CITY - ST - ZIP	HILLIARD, FL 32046
TITLE	CT
NAME	THOMPSON, KATHERINE
STREET ADDRESS	5008 KAREN ST
CITY - ST - ZIP	FERNANDINA BEACH, FL 32034
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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 01/29/04-80097-013 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)(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: *Floyd R. Vanzant Trustee*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #