

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2008 08:00 AM
Secretary of State

DOCUMENT # N00000008367

1. Entity Name
FIRST BAPTIST CHURCH OF LAKE ROUSSEAU, INC.



Principal Place of Business
7854 W. DUNNELLON RD
DUNNELLON, FL 34433

Mailing Address
7854 W. DUNNELLON RD
DUNNELLON, FL 34433



01232008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3673574

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

SMITH, PAUL
7854 W. DUNNELLON RD
DUNNELLON, FL 34433

**DO NOT WRITE
IN THIS SPACE**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2008

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

10. OFFICERS AND DIRECTORS

TITLE	PTTR
NAME	SMITH, PAUL
STREET ADDRESS	5190 MARGE LN
CITY-ST-ZIP	DUNNELLON, FL 34430
TITLE	TR
NAME	SPINKS, WAYNE
STREET ADDRESS	4905 RIVERWOOD DR
CITY-ST-ZIP	CRYSTAL RIVER, FL 34428
TITLE	C
NAME	WORMAN, JANE F
STREET ADDRESS	8665 N APPENINES PT
CITY-ST-ZIP	DUNNELLON, FL 34433
TITLE	S
NAME	UNDERWOOD, JEANETTE
STREET ADDRESS	6350 W BAGDAD ST
CITY-ST-ZIP	DUNNELLON, FL 34433
TITLE	TR
NAME	DENNIS, WILLIAM
STREET ADDRESS	3356 RIVERWOOD DR.
CITY-ST-ZIP	CRYSTAL RIVER, FL 34428
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000808401
02/07/08-80047-003 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

Paul Smith

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-29-08

Date

352 564 9121

Daytime Phone #