

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 26, 2006 8:00 am
Secretary of State

04-26-2006 90172 007 ****61.25

DOCUMENT # N01000007029

1. Entity Name
JAMES STREET BAPTIST CHURCH, INC.



Principal Place of Business
6658 JAMES STREET
MILTON, FL 32570

Mailing Address
P.O. BOX 833
MILTON, FL 32570

40062170



04102006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3752106

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

EBERHART, MARY
5875 BYROM ST.
MILTON, FL 32570

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reissuing)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

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	T HILL, CLIFFORD 6395 BAY OAKS DR MILTON, FL 32570
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LAUDERDALE, BARBARA 103 ALICE ST MILTON, FL 32570
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BATES, ANTONIO L - <i>Correction</i> 6412 SELLERS DRIVE MILTON, FL 32570
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WALKER, SANDRA 6480 WILLOW TREE COURT MILTON, FL 32570
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BREWTON, ALFRED 6033 BRECKENRIDGE DRIVE MILTON, FL 32570
TITLE NAME STREET ADDRESS CITY-ST-ZIP	F GILMORE, WARREN 105 CLARA ST MILTON, FL 32570

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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: *Warren P. Gilmore*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/06 (850) 983-0737
Date Daytime Phone #