

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007302

FILED
Mar 08, 2005
Secretary of State

Entity Name: FIRST KISSIMMEE FREEWILL BAPTIST CHURCH, INC.

Current Principal Place of Business:

460 HOME ST.
KISSIMMEE, FL 34744

New Principal Place of Business:

Current Mailing Address:

460 HOME ST.
KISSIMMEE, FL 34744

New Mailing Address:

FEI Number: 59-3754656

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUTLER, GROVER
5025 COUNTRYSIDE CT.
ST. CLOUD, FL 34771 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: D () Delete
Name: BUTLER, GROVER
Address: 5025 COUNTRYSIDE CT.
City-St-Zip: ST. CLOUD, FL 34771

Title: D () Delete
Name: WEBB, GLEN
Address: 2490 QUAIL RUN BLVD
City-St-Zip: KISSIMMEE, FL 34743

Title: D () Delete
Name: BARBER, RICK
Address: 110 S. BASS RD.
City-St-Zip: KISSIMMEE, FL 34746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: GROVER BUTLER

D

03/08/2005

Electronic Signature of Signing Officer or Director

Date