

NON-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 08, 2004 8:00 am
Secretary of State

07-08-2004 90186 021 ****61.25

DOCUMENT # N01000008535
1. Entity Name
ZEPHYRHILLS GENERAL BAPTIST CHURCH, INC.



Principal Place of Business
38621 CALVIN STREET
ZEPHYRHILLS, FL 33541

Mailing Address
38621 CALVIN STREET
ZEPHYRHILLS, FL 33541



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

06302004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
61-1605333

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HARBER, BOBBY J
38621 CALVIN STREET
ZEPHYRHILLS, FL 33541

Name Jon T. Leach, Jr.

Street Address (P.O. Box Number is Not Acceptable)

38621 Calvin St.

City

Zephyrhills

FL

Zip Code

33542

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 reinstating)

DATE

7/1/04

Filing Fee is \$61.25
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME HOYT, GENE R
STREET ADDRESS 7018 EL TORO STREET
CITY-ST-ZIP ZEPHYRHILLS, FL 33540

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME FARRINGTON, RICHARD J
STREET ADDRESS 3246 OSAGE DRIVE #213
CITY-ST-ZIP ZEPHYRHILLS, FL 33541

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE STD ☒ Delete
NAME JACOBUS, HENRY L
STREET ADDRESS 4405 STILLMAN STREET
CITY-ST-ZIP ZEPHYRHILLS, FL 33540

TITLE ☒ Change ☒ Addition
NAME STD Gary L. Baldus
STREET ADDRESS 5239 Epping Ln.
CITY-ST-ZIP Zephyrhills, FL 33541

TITLE P ☒ Delete
NAME HARBER, BOBBY J
STREET ADDRESS 38621 CALVIN STREET
CITY-ST-ZIP ZEPHYRHILLS, FL 33541

TITLE ☒ Change ☐ Addition
NAME Jon T. Leach, Jr.
STREET ADDRESS 38621 Calvin St.
CITY-ST-ZIP Zephyrhills, FL 33541

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/1/04

813-469-8744

Attached

NO1000008535
44047430

To receive the form by mail:

- Detach this postcard.
- Enter address to mail report to, if different from preprinted mailing address.
- Affix postage on reverse side and mail.
- Allow 10-14 business days to receive form.

Document # K36526

ZONARI, INC.
% MARY SCALZO
526 BELVEDERE ROAD
WEST PALM BEACH FL 33405-1229

Mail Report to:

ZONARI INC.
c/o MARY SCALZO
526 Belvedere Rd
WPB FL 33405-
1229



CR2E095 4/04

7-1-04

I DID NOT RECEIVE
anything From your office
until now. Enclosed is the
Postcard, form, check.

Mary Scalzo
Pres.