2005 NOT-FOR-PROFIT CORPORATION

FILED **ANNUAL REPORT** Jan 26, 2005 08:00 AM DOCUMENT # N01471 **Secretary of State** 1. Entity Name NORTHSIDE BAPTIST CHURCH OF BRADFORD COUNTY, INC. Principal Place of Business Mailing Address CORNER OF SR 16 & CR 225 7415 NW CR 225 STARKE, FL 32091 US STARKE, FL 32091 US 01122005 No Cha-NP CR2E037 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2510799 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PILCHER, JERRY DO NOT WRITE 407 W LAKESHORE DR STARKE, FL 32091 IN THIS SPACE 8. The above harned entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am famillar with, and accept egistered agent, name of registered agent and little if applicable. re, typed or print (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be U00000196932 Trust Fund Contribution. Added to Fees Due by May 1, 2005 01/26/05-80085-024 70.00 10. OFFICERS AND DIRECTORS πιε NAME PILCHER, JERRY STREET ADDRESS 407 W LAKESHO CITY-ST-ZIP STARKE, FL TITLE NAME CLEMONS, JAME'S STREET ADDRESS 21281 NW 62ND LANE CITY-ST-7IP STARKE, FL 32091 TITLE NAME POPPY, DAVID G STREET ADDRESS 2052 NW 223 STREET DO NOT WRITE CITY-ST-ZIP LAWTEY, FL 32058 TITLE IN THIS SPACE MOODY, WILLIAM NAME STREET ADDRESS 21892 NW 38TH AVE. CITY-ST-ZIP LAWTEY, FL 32058 TITLE NAME STANLEY, BETTINA STREET ADDRESS PO BOX 245, 231 OAK ST.

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 Statules. 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 fire-year-level ver trustee empowered to execute this leport 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

RAIFORD, FL 32083

C2TY-57-21P

TITLE NAME STREET ADDRESS

TYPED OR PRINTED NAME OF SIGNING DEFICER OR DIRECTOR