


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 01, 2007 8:00 am**  
**Secretary of State**

02-01-2007 90020 028 \*\*\*\*61.25

<b>DOCUMENT # N01754</b> 1. Entity Name <b>CHARITY BAPTIST CHURCH, INC.</b>					
Principal Place of Business <b>3825 MORRIS BRIDGE ROAD ZEPHYRHILLS FL 33543-5031</b>			Mailing Address <b>3825 MORRIS BRIDGE ROAD ZEPHYRHILLS FL 33543-5031</b>		
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent  <b>SANBORN, BARRY 7741 23RD ST ZEPHYRHILLS FL 33540</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when registering)</small>					
<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make Check Payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD SANBORN, BARRY 7741 23RD ST ZEPHYRHILLS FL 33540	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VD HUBLEY, JACK 5333 MONTEGO DR ZEPHYRHILLS FL 33541	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	STD MARSH, RICHARD 36151 BEGONIA AVE ZEPHYRHILLS FL 33541	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	STD Marsh, Richard 5528 Cypress Way Zephyrhills FL 33541 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition



1st MOORE CR2E037 (10/06)

4. FEI Number **59-2503948** Applied For ☐ Not Applicable ☐

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:** Barry J. Sanborn / Barry J. Sanborn 1/22/2007 813 715 4541  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

# ATTACHMENT

60010597  
# NO1754

## —Printing Zone—

"We Put the **QUICK** In Quick Printing"

Marsh, Richard  
5528 Caprice Way  
Zephyrhills, FL 33541

*This note is entered for  
clarity because of the fold in  
the paper and the limited  
space.*

*Thank you*

*Barry J. Sarbo*

[www.printingzone.biz](http://www.printingzone.biz)

5639 6th Street  
Zephyrhills, FL 33542  
Office: 780-7545 Fax: 780-7074  
E-mail: [printingzone@earthlink.net](mailto:printingzone@earthlink.net)

Hours Monday-Thursday: 9-5 Friday: 9-3
--

**Pick up the phone...Call the ZONE**