

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 15, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # N02000006233**

**1. Entity Name**  
**FIRST BAPTIST CHURCH OF HOWEY IN THE HILLS, INC.**



**Principal Place of Business**  
7408 EDGEWOOD BOYS RD  
GROVELAND, FL 34736

**Mailing Address**  
7408 EDGEWOOD BOYS RD  
GROVELAND, FL 34736



03032004 No Chg-NP CR2E037 (10/03)

**DO NOT WRITE IN THIS SPACE**

**4. FEI Number**  
43-1969716

**Applied For**  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

WARE, BOBBY J  
7408 EDEWOOD BOYS RANCH RD  
GROVELAND, FL 34736

**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 reinstating)

DATE

**Filing Fee is \$61.25**  
**Due by May 1, 2004**

**9. Election Campaign Financing**  
Trust Fund Contribution. ☐

**\$5.00 May Be**  
**Added to Fees**

U000000088676  
03/15/04-80060-016 61.25

**10. OFFICERS AND DIRECTORS**

<b>TITLE</b>	D
<b>NAME</b>	WARE, BOBBY J
<b>STREET ADDRESS</b>	7408 EDGEWOOD BOYS RANCH ROAD
<b>CITY - ST - ZIP</b>	GROVELAND, FL 34736
<b>TITLE</b>	D
<b>NAME</b>	WARE, SAMINDER K
<b>STREET ADDRESS</b>	7408 EDGEWOOD BOYS RANCH ROAD
<b>CITY - ST - ZIP</b>	GROVELAND, FL 34736
<b>TITLE</b>	D
<b>NAME</b>	RITCHIE, REBECCA
<b>STREET ADDRESS</b>	9508 SPRING LAKE DRIVE
<b>CITY - ST - ZIP</b>	CLERMONT, FL 34711
<b>TITLE</b>	
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY - ST - ZIP</b>	
<b>TITLE</b>	
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY - ST - ZIP</b>	

**DO NOT WRITE  
IN THIS SPACE**

**12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:**

*Rev. Bobby J. Ware*  
**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

**Date**

**Daytime Phone #**

3/7/04 352 429 0133