

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 07, 2006 8:00 am
Secretary of State

02-07-2006 90031 009 ****61.25

DOCUMENT # N02000006247

1. Entity Name

FIRST BAPTIST CHURCH OF WABASSO, INC.



Principal Place of Business

4720 86TH ST
WABASSO FL 32970

Mailing Address

P O BOX 700246
WABASSO FL 32970

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-1917617

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ROSS, NORMAN
386 TOLEDO ST
SEBASTIAN FL 32958

7. Name and Address of New Registered Agent

Name

LINDA RHYNE

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

1187 COVERBROOK LN.

City

SEBASTIAN

FL

Zip Code

32958

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

LINDA RHYNE

Linda Rhyme

1-26-06

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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

TITLE T ☒ Delete
NAME CHATHAM, THOMAS
STREET ADDRESS 1895 34TH AVE.
CITY-ST-ZIP VERO BEACH FL 32960

TITLE T ☒ Delete
NAME ROSS, NORMAN
STREET ADDRESS 386 TOLEDO ST.
CITY-ST-ZIP SEBASTIAN FL 32958

TITLE T ☐ Delete
NAME JOHNSON, GRACE
STREET ADDRESS 6436 48TH AVE.
CITY-ST-ZIP VERO BEACH FL 32967

TITLE T ☐ Delete
NAME LINDA RHYNE
STREET ADDRESS 1187 COVERBROOK LN.
CITY-ST-ZIP SEBASTIAN FL 32958

TITLE T ☐ Delete
NAME CLIFFORD RICE
STREET ADDRESS 5745 97th STREET
CITY-ST-ZIP SEBASTIAN FL 32958

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

TITLE ☐ Change ☐ Addition
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 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.

Linda Rhyme

LINDA RHYNE

1-26-06 772 591 11574