2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009175

FILED Mar 02, 2005 Secretary of State

Entity Name: FOUNTAIN HEAD BAPTIST CHURCH, INC.

Current F	Principal Place of Bus	iness:	New Principal Place	of Business:
157 N DIV	'ISION ST FL 32765 US			
o (1.25 o ,	. 2 32. 33			
Current N	lailing Address:		New Mailing Addres	s:
157 N DIV OVIEDO,	ISION ST FL 32765 US			
FEI Numbei	:: 04-3647022 FEI Nu	mber Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of Current	Registered Agent:	Name and Address	of New Registered Agent:
	CTOR LOW CREEK DRIVE FL F32765 US			
		this statement for the p	urpose of changing its registere	ed office or registered agent, or both,
in the Stat	e of Florida.			
	RE:	ature of Registered Age	ent	Date
SIGNATU	RE:	ature of Registered Age		
SIGNATU OFFICER Title: Name: Address:	RE:Electronic Signa			
SIGNATU	RE: Electronic Signa S AND DIRECTORS: DP () Delete BLAIR, VICTOR 2734 WILLOW CREEK I		ADDITIONS/CHANG Title: Name: Address:	ES TO OFFICERS AND DIRECTOR
OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	Electronic Signa S AND DIRECTORS: DP () Delete BLAIR, VICTOR 2734 WILLOW CREEK I OVIEDO, FL 32765 D () Delete MOSES, CLAFTON 1028 BECKSTROM DR		ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	ES TO OFFICERS AND DIRECTOR: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VICTOR BLAIR DP 03/02/2005