


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2006 8:00 am
Secretary of State

02-02-2006 90031 040 ****61.25

DOCUMENT # N02000009425 1. Entity Name MORNING STAR BAPTIST CHURCH LAKE CITY, FLORIDA, INC.					
Principal Place of Business 578 E DUVAL ST LAKE CITY, FL 32055			Mailing Address PO BOX 2091 LAKE CITY, FL 32056		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
				Country	
6. Name and Address of Current Registered Agent REEDY, STANLEY E JR. 3003 SW OAK HILL ST. LAKE CITY, FL 32025					
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>					
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 reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	REEDY, STANLEY E JR.		NAME		
STREET ADDRESS	3003 SE OAK HILL ST.		STREET ADDRESS		
CITY-ST-ZIP	LAKE CITY, FL 32025		CITY-ST-ZIP		
TITLE	T	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BAUMAN, KIMBERLY A		NAME		
STREET ADDRESS	153 NW LAYTON LANE		STREET ADDRESS		
CITY-ST-ZIP	LAKE CITY, FL 32055		CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	GREEN, FRANCES		NAME		
STREET ADDRESS	3671 SW BIRLEY AVE		STREET ADDRESS		
CITY-ST-ZIP	LAKE CITY, FL 32024		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	FLOYD, WAYNE		NAME		
STREET ADDRESS	RT. 24, BOX 163		STREET ADDRESS		
CITY-ST-ZIP	LAKE CITY, FL 32024		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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: <i>Stanley E. Reedy Jr.</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			1/22/06 386-719-4316 <small>Date Daytime Phone #</small>		

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01072006 Chg-NP CR2E037 (11/05)

4. FEI Number
38-3677732

Applied For
Not Applicable

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