2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2005
Secretary of State

DOCUMENT# N02671

Entity Name: NEW TESTAMENT BAPTIST CHURCH OF INVERNESS, INC.

Current Principal Place of Business:

40 N. SHEFFIELD TERR.
INVERNESS, FL 32650

New Principal Place of Business:

Current Mailing Address:

40 N. SHEFFIELD TERR.
INVERNESS, FL 32650

New Mailing Address:

FEI Number: 59-2933924 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KOVACH, MICHAEL T. ES
106 N OSCEOLA AVE
INVERNESS, FL 34450 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	CLAYBORN, CLIFTON H PD	
Address:	40 N. SHEFFIELD TERR.	
City-St-Zip:	INVERNESS, FL 34453	
Title:	VD	( ) Delete
Name:	DOLLAR, ROBERT L VD	
Address:	155 S. ALLMAN TERRANCE	
City-St-Zip:	LECANTO, FL 34461	
Title:	D	( ) Delete
Name:	CLAYBORN, WAYNE D	
Address:	680 N INDEPENDENCE DR	
City-St-Zip:	INVERNESS, FL 34453	
Title:	D	( ) Delete
Name:	DURBIN, MICHAEL J D	
Address:	44 S. ALLMAN TERRACE	
City-St-Zip:	LECANTO, FL 34461	
Title:	D	( ) Delete
Name:	DOLLAR, DAVID D	
Address:	PO BOX 1584	
City-St-Zip:	HERNANDO, FL 34442	
Title:	TD	( ) Delete
Name:	DOLLAR, LEE TD	
Address:	20190 S.W. 54TH ST.	
City-St-Zip:	DUNNELLON, FL 34431	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: CLIFTON H. CLAYBORN PD 04/11/2005

Electronic Signature of Signing Officer or Director — Date