

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 03, 2004 8:00 am
Secretary of State

03-03-2004 90011 042 ****61.25

DOCUMENT # N03000007270

1. Entity Name

FAITH BAPTIST CHURCH INC.



Principal Place of Business

P.O. BOX 278
ORANGE LAKE FL 32681

Mailing Address

P.O. BOX 278
ORANGE LAKE FL 32681

64010003



MOORE CR2E037 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

74-3102314

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

BUTLER, WILLIE C
3839 HWY 318 WEST
ORANGE LAKE FL 32681

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

Willie C. Butler Willie C. Butler

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2004**

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 PD ☐ Delete
NAME OWENS, EUGENE
STREET ADDRESS P.O. BOX 278
CITY-ST-ZIP ORANGE LAKE FL 32681

TITLE VPD ☐ Delete
NAME BUTLER, WILLIE C
STREET ADDRESS P.O. BOX 278
CITY-ST-ZIP ORANGE LAKE FL 32681

TITLE S ☐ Delete
NAME BUTLER, SHIRLEY A
STREET ADDRESS P.O. BOX 278
CITY-ST-ZIP ORANGE LAKE FL 32681

TITLE TD ☐ Delete
NAME BAGLEY, LAVONT
STREET ADDRESS 2155 N.E. 184TH ST
CITY-ST-ZIP CITRA FL 32113

TITLE D ☐ Delete
NAME RUFF, WALTER C
STREET ADDRESS PO BOX 527
CITY-ST-ZIP MCINTOSH FL 32664

TITLE D ☐ Delete
NAME HULL, MELVIN L
STREET ADDRESS PO BOX 374-5420 N.W 190TH
CITY-ST-ZIP ORANGE LAKE FL

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 *TD Bagley, Edward Lavond*
STREET ADDRESS *2155 NE 184TH ST*
CITY-ST-ZIP *CITRA FL 32113*

TITLE ☒ Change ☐ Addition
NAME *D CRUFF Walter W*
STREET ADDRESS *P.O. Box 527*
CITY-ST-ZIP *McIntosh FL 32664*

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP *Orange Lake, FL 32681*

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

Willie C. Butler Willie C. Butler

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

352-591-1551