

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2006 08:00 AM
Secretary of State

DOCUMENT # N03000008069

1. Entity Name
BIBLE BELIEVERS CHRISTIAN FELLOWSHIP, INC.



Principal Place of Business
**2106 PARK AVENUE
ORANGE PARK, FL 32073 US**

Mailing Address
**P.O. BOX 8239
FLEMING ISLAND, FL 32006**



03072006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
75-3067320

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**BECKLES, CURTIS A
1575 HAMMOCK BAY CT.
ORANGE PARK, FL 32003**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

DATE
04/05/06-80008-020 61.25

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
BECKLES, CURTIS A
1575 HAMMOCK BAY CT.
ORANGE PARK, FL 32003**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
BECKLES, IRISH L
1575 HAMMOCK BAY CT.
ORANGE PARK, FL 32003**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
MILLER, BETTYE
1698 SUSAN DR.
MIDDLEBURG, FL 32068**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ROSS, DIANE
1321 EAST ST.
GREEN COVE SPRINGS, FL 32043**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**COB
FRANCIS, LOQUITA B.
515 LAMONT STREET
GREEN COVE SPRINGS, FL 32043**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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:

CURTIS A. BECKLES

03-14-06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #