2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010198

Entity Name: FLORIDA BAPTIST COLLEGE, INC

FILED Jan 1<u>2, 200</u>6 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5121 KELLY ROAD 5121 KELLY ROAD TAMPA, FL 33615 TAMPA, FL 336154725 **Current Mailing Address: New Mailing Address:** 5121 KELLY ROAD 5121 KELLY ROAD TAMPA, FL 33615 TAMPA, FL 336154725 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TURNER, BRUCE E TURNER, BRUCE E 5121 KELLY ROAD 5121 KELLY ROAD TAMPA, FL 336154725 US TAMPA, FL 33615 US 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: BRUCE E. TURNER 01/12/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition TURNER, BRUCE E Name: Name: 7810 BAY DRIVE Address: Address: City-St-Zip: TAMPA, FL 33635 City-St-Zip: Title: Title: (X) Change () Addition () Delete FERGUSON, JEFF A Name: Name: FERGUSON, JEFF A Address: 8017 SAVANNAH SUNSET LANE Address: 7521 ABONADO ROAD City-St-Zip: TAMPA, FL 33615 City-St-Zip: TAMPA, FL 33615 Title: () Delete Title: () Change () Addition CLAYTON, JAMES Name: Name: 6801 HARBOR VIEW WAY Address: Address: City-St-Zip: TAMPA, FL 33615 City-St-Zip: () Delete Title: Title: (X) Change () Addition Name: NEDD, CLYDE Name: NEDD, CLYDE 7532 MEADOW DR. Address: 5128 HALIFAX Address: City-St-Zip: TAMPA, FL 33615 City-St-Zip: TAMPA, FL 33634 Title: () Delete Title: () Change (X) Addition LEWIS, AARON Name: Name: 6910 WILLIAMS DRIVE Address: Address: City-St-Zip: City-St-Zip: TAMPA, FL 33634

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: BRUCE E. TURNER Ρ 01/12/2006