

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007 8:00 am
Secretary of State

02-05-2007 90122 014 ****70.00

DOCUMENT # N03626

1. Entity Name
CLAY SINK BAPTIST CHURCH, INC.



Principal Place of Business
45242 LACOOCHEE-CLAY SINK RD
WEBSTER, FL 33597

Mailing Address
P.O. BOX 779
WEBSTER, FL 33597



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

508 W. S.R. 50

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
GROVELAND FL

Zip

Country

Zip

Country

34736

USA

01292007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-2437837

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SUTTON, JAMES W
823 C 478 A
WEBSTER, FL 33597

Name
TIMOTHY H. BOYETT
Street Address (P.O. Box Number is Not Acceptable)
45240 LACOOCHEE CLAY SINK ROAD
City
WEBSTER FL Zip Code
33597

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

Timothy H. Boyett

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
VD	PARKER, MARVIN L	14603 CR 737	WEBSTER, FL 33597	<input checked="" type="checkbox"/>
PD	SUTTON, JAMES W	823 C 478 A	WEBSTER, FL 33597	<input checked="" type="checkbox"/>
S	STANGC, GWENDOLYN	2518 SR 471	SUMTERVILLE, FL	<input checked="" type="checkbox"/>
T	SUTTON, SUSAN A	823 C 478 A	WEBSTER, FL 33597	<input checked="" type="checkbox"/>
VP	VAN NOSTRAN, ROY	7601 E WARM SPRINGS AVE	COLEMAN, FL 33521	<input checked="" type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
VD	HEDRY S BOYETT	37831 CRYSTA WAY	DADE CITY, FL 33523	<input checked="" type="checkbox"/>
PD	TIMOTHY H. BOYETT	45240 LACOOCHEE CLAY SINK RD	WEBSTER, FL 33597	<input checked="" type="checkbox"/>
S	KATHY J. Baker	39325 Riverland, Col.	Webster, FL 33597	<input checked="" type="checkbox"/>
T	VEGA S. BOYETT	508 W SR 50	GROVELAND, FL 34736	<input checked="" type="checkbox"/>
VP	EVERETT BOYETT	44809 LACOOCHEE CLAY SINK RD	WEBSTER, FL 33597	<input checked="" type="checkbox"/>
				<input type="checkbox"/>

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:

Timothy H. Boyett

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-1-07

Date

Daytime Phone #