

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 21, 2006 08:00 AM
Secretary of State

DOCUMENT # N04000002676

1. Entity Name

OPEN DOOR BAPTIST CHURCH OF DELAND, INC.



Principal Place of Business

227 N KEPLER RD
DELAND FL 32724

Mailing Address

227 N KEPLER RD
DELAND FL 32724

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

NO-T APPLICABLE

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

NICHOLSON, DIXIE
227 N KEPLER RD
DELAND FL 32724

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

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

(NOTE: Registered Agent signature required when remaining)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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 D ☐ Delete
NAME NICHOLSON, DIXIE
STREET ADDRESS 227 N KEPLER RD
CITY-ST-ZIP DELAND FL 32724

TITLE D ☐ Delete
NAME CATCHOT, CHARLES
STREET ADDRESS 476 NORRIS LN
CITY-ST-ZIP LAKE HELEN FL 32744

TITLE D ☐ Delete
NAME HOWE, MERRELL
STREET ADDRESS 1792 E MINNESOTA AVE
CITY-ST-ZIP DELAND FL 32724

TITLE D ☐ Delete
NAME NICHOLSON, JACK
STREET ADDRESS 227 N KEPLER RD
CITY-ST-ZIP DELAND FL 32724

TITLE D ☐ Delete
NAME PACKLAIAN, CHRISTOPHER
STREET ADDRESS 149 CYPRESS DR
CITY-ST-ZIP DEBARY FL 32713

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS 000000443006
CITY-ST-ZIP 03/04/06-80041-018 61.25

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.