

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005577

FILED
Apr 27, 2005
Secretary of State

Entity Name: ISLAND BAPTIST CHURCH OF ONECO, INC.

Current Principal Place of Business:

12523 LAKE VISTA DR
GIBSON, FL 33535

New Principal Place of Business:

5801 14TH STREET WEST
SUITE A
BRADENTON, FL 34207 US

Current Mailing Address:

12523 LAKE VISTA DR
GIBSON, FL 33535

New Mailing Address:

P.O. BOX 1482
PALMETTO, FL 34220 US

FEI Number: 41-2110896

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WAITERS, LAURA M
12523 LAKE VISTA DR
GIBSON, FL 33535 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WAIERS, L SR
Address: 12523 LAKE VISTA DR
City-St-Zip: GIBSON, FL 33535

Title: V () Delete
Name: WAITERS, LAURA M
Address: 12523 LAKE VISTA DR
City-St-Zip: GIBSON, FL 33535

Title: S () Delete
Name: BARNES, ELLISA
Address: 109 12TH STREET W
City-St-Zip: PALMETTO, FL 33421

Title: AS () Delete
Name: WASHINGTON, PEGGY
Address: 12523 LAKE VISTA DR
City-St-Zip: GIBSON, FL 33535

Title: T () Delete
Name: WAITERS, LAURA M
Address: 12523 LAKE VISTA DR
City-St-Zip: GIBSON, FL 33535

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PAST (X) Change () Addition
Name: WAIERS, L SR
Address: 12523 LAKE VISTA DR
City-St-Zip: GIBSON, FL 33535

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: AS (X) Change () Addition
Name: WASHINGTON, PEGGY
Address: 1620 26TH AVE. EAST
City-St-Zip: BRADENTON, FL 34208

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LAURA M. WAITERS

RA

04/27/2005

Electronic Signature of Signing Officer or Director

Date