


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 20, 2006 08:00 AM
Secretary of State

DOCUMENT # N04000008103	
1. Entity Name MAGNOLIA BAPTIST CHURCH OF LAUREL HILL, INC.	

Principal Place of Business 3198 HWY. 602 LAUREL HILL, FL 32567	Mailing Address 3198 HWY. 602 LAUREL HILL, FL 32567
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01152006 No Chg-NP CR2E037 (11/05)

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4. FEI Number 59-2754148	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent LAYMON, NELSON 3295 HWY 2 LAUREL HILL, FL 32567

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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LAYMON, NELSON 3295 HWY 2 LAUREL HILL, FL 32567
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V STOKES, DONALD R 3198 HWY. 602 LAUREL HILL, FL 32567
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MOONEYHAM, JUDY 3198 HWY. 602 LAUREL HILL, FL 32567
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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01/25/06-80011-004 61.25

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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 another like empowered.

SIGNATURE: <u>Donald R Stokes</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Date <u>1/16/06</u>	Daytime Phone # _____
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