

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

PS 1820

DOCUMENT # N04616 1. Entity Name BAYMEADOWS COMMUNITY CHURCH, INC.					
Principal Place of Business 4900 BAYMEADOWS ROAD JACKSONVILLE, FL 32217 US				Mailing Address 4900 BAYMEADOWS ROAD JACKSONVILLE, FL 32217 US	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		REINSTATEMENT 	
City & State		City & State		4. FEI Number 59-1719410	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SCOTT, DAN 4900 BAYMEADOWS ROAD JACKSONVILLE, FL 32217				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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 <u><i>Dan Scott</i></u> 10-25-04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	
FILE NOW!!! FEE IS \$81.25 After January 1, 2005, Fee will be \$122.50		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		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	D SCHMIDT, JAY 3539 BARBIZON CT JACKSONVILLE, FL 32257	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	500042242995 10/27/04--01040--007 **\$1.25
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MERRITT, THELMA 9061 MOORGATE CT JACKSONVILLE, FL 32257	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T HYDE, SUSAN D. 11665 STARFISH AVENUE JACKSONVILLE, FL	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P SCOTT, DAN 39 BELMONT BLVD ORANGE PARK, FL 32073	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	C OLSEN, KENNETH A SR 3029 BRIDGEVIEW DR JACKSONVILLE, FL 32216	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 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: <u><i>Susan D Hyde</i></u> 10/24/04 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date <u>10/24/04</u> Daytime Phone # <u>904 641-3904</u>	

APPROVED
AND
FILED

SECRETARY
TALLAHASSEE
FLORIDA

04 OCT 27

APPROVED
AND
FILED

tk

pg 2 of 2

Baymeadows Community Church

Rev. Kenneth A. Olsen, Sr., Pastor

October 24, 2004

Florida Department of State
Glenda Hood, Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Ms. Hood,

Enclosed you will find a check for \$61.25 for Baymeadows Community Church, Inc. 2004 Not-For-Profit Corporation Reinstatement fee. Baymeadows Community Church did not received prior notice and is requesting reinstatement without penalty.

Your assistance is appreciated.

Sincerely,



Dan Scott
President of Council
Baymeadows Community Church



4900 Baymeadows Road
Jacksonville, FL 32217

Phone/Fax: (904) 737-8133
Pager: (904) 840-7687
E-mail: BaymeadowsCommunity@Juno.Com