2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # N05000011474

1. Entity Name
FIRST BAPTIST CHURCH OF MANGO, INC

Principal Place of Business	Mailing Address
11619 DR. MARTIN LUTHER KING BLVD E. SEFFNER, FL 33584	P.O. BOX 206 MANGO, FL 33550-0206

01162006 No Chg-NP CR2E037 (11/05)

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4. FEI Number
59-6033964
☐ Applied For
☐ Not Applicable

6. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DICKERSON, VESTA A
833 BAYOU VIEW DR
BRANDON, FL 33510-2092

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000465351
03/22/06-80033-003 70.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	DICKERSON, BILLY J REV
STREET ADDRESS	833 BAYOU VIEW DR
CITY-ST-ZIP	BRANDON, FL 33510
TITLE	S
NAME	DICKERSON, VESTA A
STREET ADDRESS	833 BAYOU VIEW DR
CITY-ST-ZIP	BRANDON, FL 33510
TITLE	T
NAME	CARTER, SHARON A
STREET ADDRESS	12005 PARK AVE
CITY-ST-ZIP	SEFFNER, FL 33584
TITLE	T
NAME	HUNTER, JUANITA
STREET ADDRESS	P.O. BOX 1004
CITY-ST-ZIP	SEFFNER, FL 33583
TITLE	T
NAME	FREEMAN, JACKIE
STREET ADDRESS	11206 HOBART CT
CITY-ST-ZIP	SEFFNER, FL 33584
TITLE	C
NAME	ALLRED, NITA V
STREET ADDRESS	5511 KENNEDY HILLS DR
CITY-ST-ZIP	SEFFNER, FL 33584

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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 all other like empowered.

SIGNATURE: Vesta A. Dickerson 3/7/2006 (813) 689-1423
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #