


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 20, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N05000011474</b>	
1. Entity Name <b>FIRST BAPTIST CHURCH OF MANGO, INC</b>	

Principal Place of Business <b>11619 DR. MARTIN LUTHER KING BLVD E. SEFFNER, FL 33584</b>	Mailing Address <b>P.O. BOX 206 MANGO, FL 33550-0206</b>
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DO NOT WRITE IN THIS SPACE



03182008 No Chg-NP CR2E037 (4/06)

4. FEI Number <b>59-6033964</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  <b>DICKERSON, VESTA A 833 BAYOU VIEW DR BRANDON, FL 33510-2092</b>
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2008**

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

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

04/07/08-80005-021 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 all other like empowered.

**SIGNATURE:** Vesta A. Dickerson, Vesta A. Dickerson 3/18/2008 (813) 689-1423  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #