


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Mar 14, 2006 8:00 am
Secretary of State

02-27-2006 90111 021 ****61.25

DOCUMENT # N06380					
1. Entity Name FIRST BAPTIST CHURCH OF MASARYKTOWN, INC.					
Principal Place of Business 267 ROOSEVELT AVE MASARYKTOWN FL 34609			Mailing Address PO BOX 9045 MASARYKTOWN FL 34609		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-2689957	
				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
BENNETT, KATHRYN 267 ROOSEVELT AVE. MASARYKTOWN FL 34609			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL		Zip Code
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: <i>Kathryn Bennett</i>			DATE: <i>2-12-06</i>		
Signature, typed or printed name of registered agent and title if applicable			(NOTE: Registered Agent signature required when re-electing)		
FILE NOW 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	
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	GANT, ROBERT		NAME		
STREET ADDRESS	15128 HANKLA ROAD		STREET ADDRESS		
CITY - ST - ZIP	MASARYKTOWN FL		CITY - ST - ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	ROGERS, EUGENE V., JR.		NAME		
STREET ADDRESS	1080 WASHINGTON AVENUE		STREET ADDRESS		
CITY - ST - ZIP	MASARYKTOWN FL		CITY - ST - ZIP		
TITLE	TD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	STONE, ROBERT		NAME		
STREET ADDRESS	443 ROOSEVELT AVENUE		STREET ADDRESS		
CITY - ST - ZIP	MASARYKTOWN FL		CITY - ST - ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	GIDDENS, GERALD		NAME		
STREET ADDRESS	1048 HIGHWAY 52		STREET ADDRESS		
CITY - ST - ZIP	BROOKSVILLE FL		CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: <i>Kathryn Bennett</i>			DATE: <i>3-11-06</i>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			DATE		



ATTACHMENT
66005802

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 2, 2006

FIRST BAPTIST CHURCH OF MASARYKTOWN, INC.
PO BOX 9045
MASARYKTOWN, FL 34609

Subject: **FIRST BAPTIST CHURCH OF MASARYKTOWN, INC.**

Reference Number: **N06380**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$61.25; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

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ANNUAL REPORTS SECTION