

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2006 08:00 AM
Secretary of State

DOCUMENT # N07564

1. Entity Name
BRADFORDVILLE FIRST BAPTIST CHURCH, INC.



Principal Place of Business
**6494 THOMASVILLE ROAD
TALLAHASSEE, FL 32312 US**

Mailing Address
**6494 THOMASVILLE ROAD
TALLAHASSEE, FL 32312 US**



02242006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2484989

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**GREEN, WILLIAM H
123 SOUTH CALHOUN STREET
TALLAHASSEE, FL 32301**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

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
**TD
DOSTER, ERNEST
2352 CAREFREE COVE
TALLAHASSEE, FL 32308**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
GREEN, WILLIAM
4400 BRADFORDVILLE RD
TALLAHASSEE, FL 32308**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CD
BORDERS, GEORGE
3713 SWALLOWTAIL TRACE
TALLAHASSEE, FL 32309**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
CAMP, ROBERT (BOB) C
1744 TARPON DRIVE
TALLAHASSEE, FL 32308**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
THOMPSON, SUSAN
8515 CONGRESSIONAL DR
TALLAHASSEE, FL 32312**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1000000454853
03/15/06-80031-022 61.25

**DO NOT WRITE
IN THIS SPACE**

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: *Lawson M. Quay*

3-1-06 850.893.0893