

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2006 8:00 am
Secretary of State

02-06-2006 90062 045 ****70.00

DOCUMENT # N09761

1. Entity Name
FLORIDA BAPTIST WITNESS, INC.



Principal Place of Business
1230 HENDRICKS AVE.
JACKSONVILLE, FL 32207

Mailing Address
C/O JAMES A SMITH, SR.
1230 HENDRICKS AVE.
JACKSONVILLE, FL 32207

60011930



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01202006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
59-6001102

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SMITH, JAMES R SR
C/O JAMES A SMITH, SR.
1230 HENDRICKS AVENUE
JACKSONVILLE, FL 32207

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

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

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME JOHNSON, EDWARD
STREET ADDRESS 2401 SE 19 CIR
CITY-ST-ZIP Ocala, FL 34471

TITLE T ☒ Delete
NAME SCHAEFFER, JERRY
STREET ADDRESS 124 HOLLOW BRANCH CROSSING
CITY-ST-ZIP ORMOND BEACH, FL 32174

TITLE T ☒ Delete
NAME BLAIR, JERRY
STREET ADDRESS 9526 86TH ST
CITY-ST-ZIP LIVE OAK, FL 32060

TITLE D ☐ Delete
NAME BUCKLEY, DON W MD
STREET ADDRESS 7411 CAMELE DR
CITY-ST-ZIP PENSACOLA, FL 32504

TITLE D ☐ Delete
NAME HOLTON, EDWIN G
STREET ADDRESS 4480 OLD COLONY RD
CITY-ST-ZIP MULBERRY, FL 33860

TITLE T ☐ Delete
NAME MILLER, ROBERT
STREET ADDRESS 92 HIGH STREET
CITY-ST-ZIP WINTER HAVEN, FL 33880

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Change ☒ Addition
NAME Jeff Overton
STREET ADDRESS 250 Otter Run Dr
CITY-ST-ZIP Fernandina Beach, FL 32034

TITLE D ☐ Change ☒ Addition
NAME John C. Davis, Sr
STREET ADDRESS 5433 SE Country Club Rd
CITY-ST-ZIP Lake City, FL 32025

TITLE D ☐ Change ☒ Addition
NAME Bob Greene
STREET ADDRESS 2011 Saddlebrook Dr
CITY-ST-ZIP Pensacola, FL 32526

TITLE D ☐ Change ☒ Addition
NAME Ron Lentine
STREET ADDRESS 2028 Peregrine Ct.
CITY-ST-ZIP Pensacola, FL 32506

TITLE D ☐ Change ☒ Addition
NAME Richard Powell
STREET ADDRESS 3750 Colonial Blvd
CITY-ST-ZIP Fort Myers, FL 33912

TITLE D ☐ Change ☒ Addition
NAME Walter H. Davis
STREET ADDRESS 13 The Village Blvd
CITY-ST-ZIP Winter Haven, FL 33880

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James A. Smith Sr

1/31/06 9045963165

Date

Daytime Phone #