


**2005 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 18, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N12568</b>	
1. Entity Name THE FIRST BAPTIST CHURCH OF WESTWOOD LAKE, INC.	

Principal Place of Business 4301 SW 107TH AVENUE MIAMI, FL 33165	Mailing Address 5801 SW 120TH AVENUE MIAMI, FL 33183
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**DO NOT WRITE IN THIS SPACE**



01052005 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-6033520	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

FOX, ROBERT W  
5801 SW 120TH AVE.  
MIAMI, FL 33183

**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 \_\_\_\_\_ 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, 2005**

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	PD MORTENSEN, MARC T 4301 S.W. 107TH AVE MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SKUDARNOV, PETER 4301 SW 107 AVENUE MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CAPELLAN, SAMUEL 4301 S.W. 107TH AVE MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T FOX, ROBERT 4301 SW 107 AVE MIAMI, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FARLOW, RUSSELL 4301 SW 107TH AVE. MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD THOMSON, BILL 4301 SW 107TH AVE. MIAMI, FL

1100000184010  
01/20/05-80013-003 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:  **Robert Fox** 1/18/05 305 274 3380  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #