

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12770

FILED
Apr 28, 2006
Secretary of State

Entity Name: ALACHUA BAPTIST ASSOCIATION, INC.

Current Principal Place of Business:

936 HIGHWAY 41 SOUTH
INVERNESS, FL 34450 US

New Principal Place of Business:

Current Mailing Address:

936 HIGHWAY 41 SOUTH
INVERNESS, FL 34450 US

New Mailing Address:

FEI Number: 59-2690885

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PICKETT, JERRY
211 SEMINOLE AVE
INVERNESS, FL 34450 US

Name and Address of New Registered Agent:

LA PEER, RUSSELL W
445 NE EIGHTH AVE
OCALA, FL 34470 US

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.

SIGNATURE: RUSSELL W. LA PEER

04/28/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GANT, BOB
Address: 15128 HANKIA ROAD
City-St-Zip: MASARYKTOWN, FL 34604

Title: D () Delete
Name: FIZER, JOHN
Address: 8 PLUMBAGO COURT
City-St-Zip: HOMOSASSA, FL 34446

Title: T () Delete
Name: WOODY, JOANN
Address: 2817 GARFIELD ST. W.
City-St-Zip: INVERNESS, FL 34451 08

Title: D () Delete
Name: BEEHLER, GARY
Address: 435 W UNION PLACE
City-St-Zip: CITRUS SPRINGS, FL 34434

Title: M () Delete
Name: MADDOX, JOSEPH K
Address: 936 HWY 41 S
City-St-Zip: INVERNESS, FL 34450

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: RITTER, ALAN
Address: PO BOX 578
City-St-Zip: HOMOSASSA, FL 34487

Title: T (X) Change () Addition
Name: WOODY, JOANN
Address: 2817 GARFIELD ST. W.
City-St-Zip: INVERNESS, FL 34451

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHELLE SMITH

SEC

04/28/2006

Electronic Signature of Signing Officer or Director

Date