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

04-18-2006 90083 011 ****61.25
N14614
FILED
06 JUL 20 PM 2:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N14614

1. Entity Name

FIRST BAPTIST CHURCH OF ORANGE SPRINGS, INC.

Principal Place of Business	Mailing Address
22800 NE CTY HWY. 315 BOX 3 ORANGE SPRINGS FL 32182 US	P. O. BOX 3 BOX 3 ORANGE SPRINGS FL 32182 US

2. Principal Place of Business	3. Mailing Address
22800 NE Hwy 315	P.O. Box 3
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: ORANGE SPRINGS, FLA.	City & State: ORANGE SPRING FL.
Zip: 32182 Country: MARION	Zip: 32182 Country: MARION

1st MOORE CR2E037 (10/05)

4. FEI Number: NO-T APPLICABLE ☐ Applied For ☐ Not Applicable

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
SWAN, DAVID LEAON 102 JUNIPER DRIVE HAWTHORNE FL 32640	Name: CHESHIRE, WALTER Street Address (P.O. Box Number is Not Acceptable): 7556 NE 227 PLACE City: CITRA FL Zip Code: 32113

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: Walter Cheshire Walter Cheshire 7-16-06
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SWAN, DAVID L 102 JNIPER DRIVE HAWTHORNE FL 32640	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	O CHESHIRE WALTER 7556 NE 227 ST PL CITRA, FLA. 32113	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD CHESHIRE, WALTER 7556 NE 227TH PLACE CITRA FL 32113	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD NATALEN GARY 13272 NE 41TERR. ANTHONY FL. 32617	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S WOOD, MARGARET 14475 NE 245TH ST RD. ORANGE SPRINGS FL 32182	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S MYERS LUCY 10455 NE 210ST FT. MCCOY 32134	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T GARDNER, RICHARD L 450 SW 169ST SILVER SPRINGS FL 34488	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T GARDNER RICHARD L. 22065 NE 106AVE FT. MCCOY, FL. 32134	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: Richard L Gardner Richard L Gardner 7-17-06
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL FILING DATE