

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 23, 2004 8:00 am**  
**Secretary of State**

02-23-2004 90051 037 \*\*\*\*\*61.25

**DOCUMENT # N17999**

1. Entity Name

NEW RIVER BAPTIST CHURCH, INC.



Principal Place of Business

16703 SW 144TH AVE  
BROOKER FL 32622  
US

Mailing Address

14509 S.W. 161ST ST.  
BROOKER FL 32622  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1895554

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required



MOORE

CR2E037 (11/03)

6. Name and Address of Current Registered Agent

ANDREWS, GLENDA  
14509 S.W. 161ST ST.  
BROOKER FL 32622

7. Name and Address of New Registered Agent

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

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2004**

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 ANDREWS, WILBUR  
STREET ADDRESS 14509 S.W. 161ST ST.  
CITY-ST-ZIP BROOKER FL

TITLE D ☐ Delete  
NAME STARLING, KENNETH  
STREET ADDRESS 16610 SW 144TH AVE  
CITY-ST-ZIP BROOKER FL 32622

TITLE D ☐ Delete  
NAME HAYES, N.G.  
STREET ADDRESS 11747 N.W. CR 236  
CITY-ST-ZIP ALACHUA FL

TITLE D ☐ Delete  
NAME WALL, J E JR  
STREET ADDRESS 16394 SW 144TH AVE  
CITY-ST-ZIP BROOKER FL 32622

TITLE D ☐ Delete  
NAME BALKCOM, JAMES  
STREET ADDRESS 19375 NW C R 235  
CITY-ST-ZIP LAKE BUTLER FL 32054

TITLE D ☐ Delete  
NAME FUSSELL, DAVID  
STREET ADDRESS 16368 SW CR 235  
CITY-ST-ZIP BROOKER FL 32622

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☒ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP 32622

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP 32615

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*Willie Andrews*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-16-04

Date

352-485-1777

Daytime Phone #