

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006 8:00 am
Secretary of State

04-20-2006 90168 024 ****61.25

DOCUMENT # N30963

1. Entity Name
FIRST BAPTIST CHURCH OF GOLDEN GATE, INC.



Principal Place of Business
**2741 SANTA BARBARA BOULEVARD
NAPLES, FL 34116 US**

Mailing Address
**2741 SANTA BARBARA BOULEVARD
NAPLES, FL 34116 US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04122006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
65-0134693

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

**SHIELDS, DWAYNE
2770 47TH STREET SW
NAPLES, FL 34116**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
CLARK, HERMAN
9650-19 GREEN CYPRESS LANE
FORT MYERS, FL 33905** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PASTOR
Robert Boelk
8950 Colomades CT. #813
BONITA SPRINGS, FL 34135** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
SHIELDS, DWAYNE
2770 47TH ST., NW
NAPLES, FL 34116** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
MUELLER, MELVIN
7360 GLENMOOR LN
NAPLES, FL 34104** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TR
APONTE, SALVADOR
540 15TH ST NW
NAPLES, FL 34120** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TR
KENNETH THERIAC
1605 AGUE TRAIL
NAPLES, FL 34113** ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TR
BAILIE, JACK
141 LOGAN BLVD
NAPLES, FL 34119** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TR
SHIELDS, DWAYNE
8770-47TH ST SW
NAPLES, FL 34116** ☐ 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 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

DWAYNE SHIELDS

Date

4/17/06

Daytime Phone #

239-455-6682