


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2005 08:00 AM
Secretary of State

DOCUMENT # N34250
 1. Entity Name
FIRST BAPTIST CHURCH OF CARRABELLE, INC.



Principal Place of Business Mailing Address
C/O REBECCA L. JACKSON **C/O REBECCA L. JACKSON**
P O DRAWER 768 **P O DRAWER 768**
CARRABELLE, FL 32322 **CARRABELLE, FL 32322**



03172005 No Chg-NP CR2E037 (10/03)

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4. FEI Number Applied For
59-2265361 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
MEYER, MICHELLE C
201 AVENUE A SOUTH
PO BOX 98
CARRABELLE, FL 32322

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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: *Michelle Meyer* DATE: **3-20-05**

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 **\$5.00 May Be**
 Trust Fund Contribution. **Added to Fees**

UD0000272601
 03/22/05-80012-003 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PUTNAL, BEVIN L. 805 1ST ST W CARRABELLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TDT MIRABELLA, RUTH 612 3RD ST CARRABELLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD JACKSON, RONALD 508 RYAN DRIVE CARRABELLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TP CLARK, MIKEL L. 308 TALLHASSEE STREET CARRABELLE, FL 32322
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS MEYER, MICHELLE 1012 NW AVE C CARRABELLE, FL 32322
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: *Mikel Clark* Date: **3-20-05** Daytime Phone #: **850-697-3461**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR