

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

2005 OCT 14 AM 10:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N34392

1. Entity Name
FIRST BAPTIST CHURCH OF SILVER SPRINGS SHORES,
INC.



Principal Place of Business
414 SILVER ROAD
OCALA, FL 34472 US

Mailing Address
414 SILVER ROAD
OCALA, FL 34472 US



07122005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2985716

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

WHITE, RUBY V
744 BAHIA CIR
OCALA, FL 34472

**DO NOT WRITE
IN THIS SPACE**

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 *Ruby V White*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

10/11/05

DATE

Filing Fee is \$61.25
Due by September 7, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

| | | |
|--|---|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP LEIST, ALA H 520 SE WENONA AVENUE OCALA, FL 34471 | <i>VP William McArthur 8 Hickory Track Run Ocala FL 34472</i> |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD DENTON, SYLVESTER 513 SAPPHIRE LANE OCALA, FL 34472 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD WHITE, RUBY V 744 BAHIA CIR OCALA, FL 34472 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T MCDONALD, BERNICE 12 PINE RADIAL DR OCALA, FL 34472 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D NAVARRO, STEPHEN 2997 SE 44TH ST OCALA, FL 34480 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D MCQUEEN, EDWARD 16 BAHIA PASS TRACK OCALA, FL 34472 | <i>Ala H. Leist 520 SE Wenona Ave Ocala FL 34471</i> |

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**DO NOT WRITE
IN THIS SPACE**

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: *Ruby V White*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/12/05

Date

Daytime Phone #

10/19/05