## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # N35857

1. Entity Name CENTRAL BAPTIST CHURCH OF JUPITER, FLORIDA, INC.



Principal Place of Business

Mailing Address

18477 LOXAHATCHEE RIVER ROAD JUPITER, FL 33458 US 18477 LOXAHATCHEE RIVER ROAD JUPITER, FL 33458 US

## FILED May 04, 2005 8:00 am Secretary of State

05-04-2005 90137 011 \*\*\*\*70.00



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6. Name and Address of Current Registered Agent

04252005 No Chg-NP CR2E037 (10/03)

4.	FEI Number
	NOT APPLICABLE

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

BAKER, MILDRED B 10479 157TH STREET, NO. JUPITER, FL 33478

## 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 Signature, typed or printed name of registered agent and title if applicable. (MOTE: Registered Agent signature required when reinstating)  DATE								
	Filing Fee is \$61.25 Due by May 1, 2005	Election Campaign Finan     Trust Fund Contribution.	iding	\$5.00 May Be Added to Fees				
10. OFFICERS AND DIRECTORS								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT BAKER, MILDRED B 10479 157TH ST., N. JUPITER, FL 33478							
TITLE NAME STREET ADDRESS CHY-ST-ZIP	VT PLEDGER, THOMAS 16561 JUPITER FARMS RD JUPITER, FL 33478							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST ULMER, DONALD 11779 159TH COURT N		-	DΩ	NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	JUPITER, FL 33478				THIS SPACE			
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TITLE 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 chapted or on an attachment with an address with the state of the s								