

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 25, 2007 8:00 am**  
**Secretary of State**

01-25-2007 90034 044 \*\*\*\*61.25

**DOCUMENT # N39046**

1. Entity Name  
**FIRST BAPTIST CHURCH OF WINTER BEACH, INC.**



Principal Place of Business  
**6655 N. US #1  
WINTER BEACH, FL 32971**

Mailing Address  
**P.O. BOX 156  
WINTER BEACH, FL 32971**

00000001



01182007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number  
**59-1971712**

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

**MAIN, LEAH R  
864 MULBERRY ST  
SEBASTIAN, FL 32958**

7. Name and Address of New Registered Agent

Name  
**Gerald B. Heckman**

Street Address (P.O. Box Number is Not Acceptable)  
**6315 48th Avenue**

City  
**Vero Beach**

FL Zip Code  
**32967**

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]*

**Gerald B. Heckman**

**1/18/07**

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

(NOTE: Registered Agent signature required when re-registering)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2007**

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 **P** ☐ Delete  
NAME **HECKMAN, GERALD B**  
STREET ADDRESS **6315 48TH AVE**  
CITY-ST-ZIP **VERO BEACH, FL 32967**

TITLE **VP** ☐ Delete  
NAME **BRANNAN, LINDA**  
STREET ADDRESS **9675 FLEMING GRANT RD**  
CITY-ST-ZIP **VERO BEACH, FL 32967**

TITLE **T** ☒ Delete  
NAME **MAIN, LEAH**  
STREET ADDRESS **864 MULBERRY**  
CITY-ST-ZIP **SEBASTIAN, FL 32958**

TITLE **S** ☐ Delete  
NAME **HECKMAN, KATHY H**  
STREET ADDRESS **6315 48TH AVE**  
CITY-ST-ZIP **VERO BEACH, FL 32967**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE **Treasurer** ☒ Change ☐ Addition  
NAME **Delta Jordan**  
STREET ADDRESS **1137 3rd Avenue**  
CITY-ST-ZIP **Vero Beach, FL 32960**

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

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 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:

*Kathy H. Heckman, Secretary*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**Kathy H. Heckman**

**1/18/07**  
Date

**772-231-4343**  
Daytime Phone