



**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 27, 2004 08:00 AM
Secretary of State

DOCUMENT #, N4.1921 1. Entity Name SUNRISE BAPTIST CHURCH, INC.	
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Principal Place of Business P.O. BOX 851 JASPER, FL 32052 US	Mailing Address P.O. BOX 851 JASPER, FL 32052 US
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DO NOT WRITE IN THIS SPACE



07072004 No Chg-NP CR2E037 (10/03)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**SMITH, WAYNE
11610 CR6 EAST
JASPER, FL 32052**

**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 Wayne Smith DATE 7/25/04
Signature filed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WETHERINGTON, O W 2725 N.W. US HIGHWAY 129 JASPER, FL 32052
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SMITH, W 11610 CR 6 EAST JASPER, FL 32052
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HUGHES, K 1650 CARL STREET N.W. JASPER, FL 32052
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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07/27/04-80003-007 61.25

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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)(f), 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: Wayne Smith **WAYNE Smith** 7/25/04-792-1794
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #