2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

5/1/

FILED
Jul 06, 2006 8:00 am
Secretary of State
05-01-2006 90395 039 ****61.25

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DOCUMENT # N45947

1. Entity Name
SOLOMON BAPTIST CHURCH, INC.

Principal Place of Business	Mailing Address
3220 NEW BERLIN RD. JACKSONVILLE, FL 32207	3220 NEW BERLIN RD. JACKSONVILLE, FL 32207

04252006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3092572 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MEADERS, DONALD V 1705 EAST ADAMS STREET JACKSONVILLE, FL 32202	Name JERRY W. HORTON Street Address (P.O. Box Number is Not Acceptable) 3220 NEW BERLIN RD City Jacksonville FL Zip Code 32207

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 Jerry Horton Jerry Horton 4-28-06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HORTON, JERRY W 3220 NEW BERLIN RD. JACKSONVILLE, FL 32207	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CREWS, JACK W 15779 SHELLCRACKER RD. JACKSONVILLE, FL 32226	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SMITH, PARKS M 5953 HECKSCHER DRIVE JACKSONVILLE, FL 32226	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE D / NAME / STREET ADDRESS / CITY-ST-ZIP	WILKERSON, FRANK 13170 Hwy 301 Bryceville, FL 32009	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE D / NAME / STREET ADDRESS / CITY-ST-ZIP	PRIESTER, BUTLER 1663 W. 30th St Jax FL 32209	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

Deacon
Deacon

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: Jack Keith Crews 4-28-06 904-3829542
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

- Frank Wilkerson
- Butler Priester III