


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 30, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N46248</b> 1. Entity Name COVE BAPTIST CHURCH OF PANAMA CITY, FLORIDA, INC.	
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Principal Place of Business 100 N MACARTHUR AVE PANAMA CITY, FL 32401	Mailing Address 100 N MACARTHUR AVE PANAMA CITY, FL 32401
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**DO NOT WRITE IN THIS SPACE**



01132004 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-6018997	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent  BUTTS, RACHEL N 403 E 4TH ST PANAMA CITY, FL 32401	<b>DO NOT WRITE IN THIS SPACE</b>
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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 <u>Rachel N Butts</u> Signature, typed or printed name of registered agent and title if applicable.	DATE <u>1/28/04</u> (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	000000023263 02/02/04-80019-014 61.25
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD BUTTS, RACHEL N 403 E 4TH ST PANAMA CITY, FL 32401
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD KEEN, NATHAN 620 FIRST COURT PANAMA CITY, FL 32401
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CD DANIELS, GEORGE 116 GAYLE AVE PANAMA CITY, FL 32401
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**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: <u>Rachel N Butts</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	DATE <u>1/28/04</u> 820872-0462 Daytime Phone #