## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N49575

FILED Mar 09, 2006 Secretary of State

Entity Name: THOMASVILLE ROAD BAPTIST CHURCH, INC.

Current Principal Place of Business:

New Principal Place of Business:

3131 THOMASVILLE RD

TALLAHASSEE, FL 32308

Current Mailing Address: New Mailing Address:

3131 THOMASVILLE RD TALLAHASSEE, FL 32308

FEI Number: 59-6033961 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SMITH, ROGER C 573 TIMBERLANE

TALLAHASSEE, FL 32312 US

**OFFICERS AND DIRECTORS:** 

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.

SIGNATURE:

Electronic Signature of Registered Agent Date

## · ·

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CT () Delete Title: CT (X) Change () Addition

 Name:
 SMITH, ROGER
 Name:
 SMITH, ROGER

 Address:
 573 TIMBERLANE
 573 TIMBERLANE
 573 TIMBERLANE

 City-St-Zip:
 TALLAHASSEE, FL
 32312

Title: T ( ) Delete Title: T (X) Change ( ) Addition Name: HEAD, CHARLES Name: HEAD, CHARLES

Address: 1209 WINIFRED DR Address: 1209 WINIFRED DR
City-St-Zip: TALLAHASSEE, FL City-St-Zip: TALLAHASSEE, FL 32308

Title: T ( ) Delete Title: T (X) Change ( ) Addition

 Name:
 LAND, MARIE
 Name:
 LAND, MARIE

 Address:
 1509 BASS BAY DR
 Address:
 1509 BASS BAY DR

 City-St-Zip:
 TALLAHASSEE, FL
 City-St-Zip:
 TALLAHASSEE, FL
 32312

Title: P ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 CLARK, CURTIS D
 Name:

 Address:
 7797 CORNUCOPIA LANE
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32309
 City-St-Zip:

Title: CFO () Delete Title: () Change () Addition

 Name:
 BROWN, H NEIL
 Name:

 Address:
 1215 REDFIELD ROAD
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32317
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: H NEIL BROWN CFO 03/09/2006