2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002142

Name:

Address:

City-St-Zip:

MALPHURS, TOMMY

ALACHUA, FL 32615

17216 NW 262ND AVE.

Entity Name: NEW OAK GROVE BAPTIST CHURCH, INC.

FILED Apr 20, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 18100 NW 262 AVE US ALACHUA, FL 32615 **Current Mailing Address: New Mailing Address:** 18100 NW 262 AVE ALACHUA, FL 32615 US FEI Number: 59-2126499 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: HUNTER, BILLY SR. 14905 PEGGY RD ALACHUA, FL 32615 US 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ALLIGOOD, BILLY Name: Name: Address: 17928 NW 262 AVE Address: City-St-Zip: ALACHUA, FL 32615 City-St-Zip: Title: () Delete Title: () Change () Addition NEWSOM, WILLIAM Name: Name: Address: 19812 NW CR 236 Address: City-St-Zip: HIGH SPRINGS, FL 32643 City-St-Zip: Title: () Delete Title: () Change () Addition ALLIGOOD, JERRY Name: Name: 17420 NW 262ND AVE. Address: Address: City-St-Zip: ALACHUA, FL 32615 City-St-Zip: () Delete Title: Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Name:

Address:

City-St-Zip:

SIGNATURE: BILLY ALLIGOOD D 04/20/2004