

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002709

FILED  
Mar 22, 2005  
Secretary of State

**Entity Name:** COOPERATIVE BAPTIST FELLOWSHIP FOUNDATION OF FLORIDA, INC.

**Current Principal Place of Business:**

217 HILLCREST ST.  
LAKELAND, FL 33815 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 2556  
LAKELAND, FL 33806 US

**New Mailing Address:**

**FEI Number:** 59-3223420

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ANDERSON, PATRICK R  
817 LEXINGTON STREET  
LAKELAND, FL 33801 US

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

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:**

Title: D ( ) Delete  
Name: ANDERSON, PATRICK R  
Address: 817 LEXINGTON STREET  
City-St-Zip: LAKELAND, FL 33801

Title: D ( ) Delete  
Name: ALLERTON, TOM  
Address: 545 KAREN COURT  
City-St-Zip: ALTAMONTE SPRINGS, FL 327013635

Title: D ( ) Delete  
Name: BASS, JEAN  
Address: 1824 27 AVE  
City-St-Zip: VERO BEACH, FL 329603069

Title: D ( ) Delete  
Name: BORDERS, GEORGE  
Address: 3713 SWANTAIL TRACE  
City-St-Zip: TALLAHASSEE, FL 32309

Title: D ( ) Delete  
Name: DAY, HAYWOOD  
Address: 4580 RANGE RD  
City-St-Zip: NICEVILLE, FL 32578

Title: D ( ) Delete  
Name: CARRIN, TERRY  
Address: 305 NORTH VILLAGE ST  
City-St-Zip: CELEBRATION, FL 347475051

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: MCQUAIG, DAWSON  
Address: 4662 SWILCAN BRIDGE LANE, S.  
City-St-Zip: JACKSONVILLE, FL 32207-520 US

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.

SIGNATURE: PATRICK R ANDERSON

D

03/22/2005

Electronic Signature of Signing Officer or Director

Date