2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2006 08:00 AM
Secretary of State

DOCUMENT # N93000003308

1. Entity Name
FIRST MISSIONARY BAPTIST CHURCH OF DEANS COURT, INC.

Principal Place of Business	Mailing Address
811 NW 9TH AVE OKEECHOBEE, FL 34973-0822	PO BOX 2400 OKEECHOBEE, FL 34973-2400

DO NOT WRITE IN THIS SPACE

03062006 No Chg-NP CR2E037 (11/05)

4. FEI Number
65-0463949
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

SMITH, LEROY
811 NW 9TH AVE
OKEECHOBEE, FL 34973-0822

DO NOT WRITE IN THIS SPACE

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: Pastor 3/26/06
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

000000483106
04/11/06-80104-006 70.00

10. OFFICERS AND DIRECTORS

TITLE	PVD
NAME	CROWELL, MALINDA S
STREET ADDRESS	811 N.W. 9 AVE.
CITY-ST-ZIP	OKEECHOBEE, FL 34973
TITLE	2VD
NAME	COTTON, CYNTHIA
STREET ADDRESS	924 N.W. 10TH STREET
CITY-ST-ZIP	OKEECHOBEE, FL 34972
TITLE	DT
NAME	COPE, WILLIE D
STREET ADDRESS	1724 N.E. 4TH ST.
CITY-ST-ZIP	OKEECHOBEE, FL
TITLE	DS
NAME	COPE, ALGIA
STREET ADDRESS	1724 N.E. 4TH ST.
CITY-ST-ZIP	OKEECHOBEE, FL
TITLE	DC
NAME	KILPATRICK, MARY
STREET ADDRESS	1796 N.E. 3RD ST.
CITY-ST-ZIP	OKEECHOBEE, FL 34972
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 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 an an attachment with an address, with all other like empowered.

SIGNATURE: Pastor Rev. LeRoy Smith, Pastor 3/26/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

954-435-9764