¹2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # N93000003969

PLEASANT GROVE BAPTIST CHURCH, INC.



FILED Feb 27, 2006 08:00 AM Secretary of State

Principal Place of Business

9301 GULF BEACH HIGHWAY PENSACOLA, FL 32507

Malling Address

9301 GULF BEACH HIGHWAY PENSACOLA, FL 32507



01302006 No Chg-NP

CR2E037 (11/05)

4. FEI Number 59-6166096

Applied Far Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

	C. Hame and Floorest C. Carrette Logi	araigh Macili			
LOFTON, JAMES A 10609 CREEK RIDGE DRIVE PENSACOLA, FL 32507			DO NOT WRITE IN THIS SPACE		
the obligat	lons of registered agent.		d office of re	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE_	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	Election Campaign Finan Trust Fund Contribution.	·	\$5.00 May Be Added to Fees	03/08/06-80076-804 61.25
10.	OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOFTON, JAMES A 10609 CREEK RIDGE DRIVE PENSACOLA, FL 32506				
title name street address cuty-st-zip	D BLUM, EDWARD 9450 S LOOP ROAD PENSACOLA, FL 32507				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COMMANDER, COLEMAN 2725 MERCADO AVE PENSACOLA, FL 32507		DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			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 it 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 eddress, with all other like empowered.

SIGNATURE: 🖔

TITLE NAME STREET ADDRESS CITY-ST-ZIP MILE NAME STREET ADDRESS

> James A. Lofton 2-21-06 SONATURE AND TYPED OR PRINTED HAMPOF SKINNIG OFFICER OR DIRECTOR