

**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 19, 2004 8:00 am
Secretary of State

07-19-2004 90015 050 ****61.25

DOCUMENT # N93000005812

1. Entity Name
FIRST BAPTIST CHURCH OF EUSTIS, INC.



Principal Place of Business
**3551 E ORANGE AVE
EUSTIS, FL 32726 US**

Mailing Address
**P.O. BOX 129
EUSTIS, FL 32726**

54063651



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07022004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

Zip
32736

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CRUMPTON, JOSEPH
226 WOODLAND DR.
EUSTIS, FL 32736**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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 September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DP Delete
NAME CRUMPTON, JOSEPH
STREET ADDRESS 226 WOODLAND DR.
CITY-ST-ZIP EUSTIS, FL 32736

TITLE D Change Addition
NAME Germeroth, Daniel
STREET ADDRESS P.O. Box 1894
CITY-ST-ZIP Lady Lake, FL 32158

TITLE D Delete
NAME HANNA, NICK
STREET ADDRESS PO BOX 1422
CITY-ST-ZIP TAVARES, FL 32778

TITLE DVP Change Addition
NAME Caddell, Daniel
STREET ADDRESS P.O. Box 677
CITY-ST-ZIP TAVARES, FL 32778

TITLE DS Delete
NAME JOLLIFF, JOHN
STREET ADDRESS P O BOX 1081
CITY-ST-ZIP SORRENTO, FL 32776

TITLE D Change Addition
NAME Collins, Donna
STREET ADDRESS 23235 SR 44
CITY-ST-ZIP EUSTIS, FL 32726

TITLE DV Delete
NAME MADDY, MICHELLE
STREET ADDRESS 16130 LAKE SAUNDERS DR
CITY-ST-ZIP TAVARES, FL 32778

TITLE D Change Addition
NAME BLAIR, JOHN
STREET ADDRESS 37312 North CR 44A
CITY-ST-ZIP EUSTIS, FL 32726

TITLE D Delete
NAME GEREMROTH, DANIEL
STREET ADDRESS 2039 OVERVIEW LANE
CITY-ST-ZIP EUSTIS, FL 32726

TITLE D Change Addition
NAME GAVIN, GEORGE
STREET ADDRESS 4149 TARPON AVENUE
CITY-ST-ZIP UMATILLA, FL 32784

TITLE D Delete
NAME CADDELL, DANIEL
STREET ADDRESS PO BOX 677
CITY-ST-ZIP TAVARES, FL 32778

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE: Donna Collins Donna Collins 7/7/04 (352)357-9440
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #