


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 13, 2006 08:00 AM
Secretary of State

DOCUMENT # N94000000624	
1. Entity Name THE FIRST BAPTIST CHURCH OF HOLLISTER, FLORIDA, INCORPORATED	

Principal Place of Business 107 HOLLISTER CHURCH RD HOLLISTER, FL 32147	Mailing Address P.O. BOX 118 108 CHURCH RD HOLLISTER, FL 32147
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01112006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1609752	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MARDIS, MARCUS R II 109 HOLLISTER CHURCH RD HOLLISTER, FL 32147
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**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 Marcus R Mardis II

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MARDIS, MARCUS R II 200 HORSEMAN CLUB PALATKA, FL 32177
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MOTYKLE, RONALD 107 HOLLISTER CHURCH RD HOLLISTER, FL 32147
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WISHAM, MARY 107 HOLLISTER CH. RD HOLLISTER, FL 32147
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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01/18/06-80006-019 61.25

**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 on an attachment with an address, with all other like empowered.

SIGNATURE: Marcus R Mardis II
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-11-06
Date

386-328-2436
Daytime Phone