2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 22, 2006 08:00 AM
Secretary of State

DOCUMENT # N94000000963

1. Entity Name
SOUTHWEST BAPTIST CHURCH, INC.

Principal Place of Business	Mailing Address
8565 COLLINS ROAD JACKSONVILLE, FL 32210	6107 118TH STREET JACKSONVILLE, FL 32244

06192006 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3177040
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MOSLEY, DORIS
6107 118TH STREET
JACKSONVILLE, FL 32244

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	CERCY, DARRELL L
STREET ADDRESS	6083 118TH STREET
CITY-ST-ZIP	JACKSONVILLE, FL 32244
TITLE	D
NAME	WRIGHT, WILLIAM W
STREET ADDRESS	2030 BUCKMAN STREET
CITY-ST-ZIP	JACKSONVILLE, FL 3220
TITLE	DP
NAME	MOSLEY, DORIS E
STREET ADDRESS	6107 118TH STREET
CITY-ST-ZIP	JACKSONVILLE, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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06/22/06-80003-001 61.25

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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: Doris Mosley 6.19.06 (904) 771-5924
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #