

**2007 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**

**Feb 12, 2007 08:00 AM  
Secretary of State**

**DOCUMENT # N94000003918**

1. Entity Name  
**BAYLESS HIGHWAY MISSIONARY BAPTIST CHURCH,  
INC.**



Principal Place of Business  
**11798 NW CR 225  
STARKE, FL 32091**

Mailing Address  
**11798 NW CR 225  
STARKE, FL 32091**



02062007 No Chg-NP

CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-3049999**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**COOPER, JOHN S  
100 W. CALL ST.  
STARKE, FL 32091**

**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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when restate)

DATE \_\_\_\_\_

**Filing Fee Is \$61.25  
Due by May 1, 2007**

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	D MORGAN, LEATON JR. 11798 NW CR 225 STARKE, FL 32091
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALTMAN, DONALD 11798 NW CR 225 STARKE, FL 32091
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANDREWS, FRANCIS 11798 NW CR 225 STARKE, FL 32091
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KELLY, H.B. 11798 NW CR 225 STARKE, FL 32091
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000632661  
02/21/07-80031-007 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:** Francis Andrews **FRANCIS ANDREWS** 1/7/07 964-6340

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #