

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005483

FILED
Mar 31, 2005
Secretary of State

Entity Name: CHICKEE BAPTIST CHURCH OF HOLLYWOOD, INC.

Current Principal Place of Business:

2910 N 64TH AVE
HOLLYWOOD, FL 33024

New Principal Place of Business:

Current Mailing Address:

2910 N 64TH AVE
HOLLYWOOD, FL 33024 US

New Mailing Address:

FEI Number: 65-0548593

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAYNE, ARLEN
6700 RALEIGH STREET
HOLLYWOOD, FL 33024 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PAYNE, ARLEN
Address: 8700 RALIGH ST.
City-St-Zip: HOLLYWOOD, FL

Title: D () Delete
Name: JAMPER, ANNIE
Address: 6525 OSCEOLA CIRCLE WEST
City-St-Zip: HOLLYWOOD, FL 33024

Title: TD () Delete
Name: BILLIE, SALLY
Address: 3021 NW 63RD AVE
City-St-Zip: HOLLYWOOD, FL

Title: D () Delete
Name: BAKER, JUDY
Address: 3003 HOWARD TOMMIE DR
City-St-Zip: HOLLYWOOD, FL 33024

Title: S () Delete
Name: LYTTLE, YOLANDA
Address: 7400 STIRLING RD, APT 315
City-St-Zip: HOLLYWOOD, FL 33024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: ARLEN PAYNE

PD

03/31/2005

Electronic Signature of Signing Officer or Director

Date