


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2007 08:00 AM
Secretary of State

DOCUMENT # N94000006304	
1. Entity Name BEULAH FIRST BAPTIST CHURCH, INC.	

Principal Place of Business 109 MCGRUFF STREET FT. WALTON BEACH, FL 32548	Mailing Address P.O. BOX 545 FORT WALTON BEACH, FL 32549
---	--

DO NOT WRITE IN THIS SPACE



02092007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-3401693	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent THIGPEN, SCOTTIE L 109 MCGRUFF ST. FT. WALTON BEACH, FL
--

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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	000000638916 02/28/07-80005-010 70.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD REGULUS, ELIJAH J 934 JOHN WAYNE CIRCLE FORT WALTON BEACH, FL 32547
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/T LOGGINS, DAVID 884 MASTERS BLVD. SHALIMAR, FL 32579
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JONES, LEE K 1916 ALFRED BLVD NAVARRE, FL 32566
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TT MAXWELL, GLENN 20 E. CASA LOMA GLENN MARY ESTHER, FL 32569
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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: ELIJAH J. Regulus	02/13/07	(850) 243-1724
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>		