

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000103

FILED
Mar 04, 2005
Secretary of State

Entity Name: FAITH BAPTIST CHURCH OF POLK COUNTY, INC.

Current Principal Place of Business:

365 TERRACE AVE W
LAKE ALFRED, FL 33850

New Principal Place of Business:

922 MAGNOLIA AVENUE
AUBURNDALE, FL 33823

Current Mailing Address:

P.O. BOX 564
LAKE ALFRED, FL 33850

New Mailing Address:

FEI Number: 59-3289676 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PATTERSON, RUTH S
713 ROSE STREET S. #10
AUBURNDALE, FL 33823 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: TD () Delete
Name: PATERSON, ROSE S
Address: 713 ROSE STREET S #10
City-St-Zip: AUBURNDALE, FL 33823

Title: VPD () Delete
Name: PARMER, HOUSTON
Address: 602 PINE STREET
City-St-Zip: AUBURNDALE, FL 33823

Title: TD () Delete
Name: GUY, NELL
Address: 101 SMITH ST.
City-St-Zip: AUBURNDALE, FL 33823

Title: SD () Delete
Name: DOWNS, DORIS
Address: 260 E. HOFFMAN ST
City-St-Zip: LAKE ALFRED, FL 33850

Title: TD () Delete
Name: GUY, BILLY J
Address: 101 SMITH ST.
City-St-Zip: AUBURNDALE, FL 33823

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: PATTERSON, RUTH S
Address: 713 ROSE STREET S #10
City-St-Zip: AUBURNDALE, FL 33823

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

Title: D (X) Change () Addition
Name: PATTERSON, RONNIE A
Address: 713 ROSE STREET S #10
City-St-Zip: AUBURNDALE, FL 33823

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: RUTH S. PATTERSON

TD

03/04/2005

Electronic Signature of Signing Officer or Director

Date