

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 15, 2004 8:00 am
Secretary of State

03-15-2004 90027 006 ****61.25

DOCUMENT # N95000005537

1. Entity Name

FIRST BAPTIST CHURCH OF ALTURAS, INC.



Principal Place of Business

7690 POINSETTA AVENUE
ALTURAS FL 33820
US

Mailing Address

P. O. BOX 38 N/A
ALTURAS FL 33820
US

24022996



MOORE CR2E037 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3389858

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HIELSCHER, EVELYN
3RD STREET AND OAK DRIVE
ALTURAS FL 33820

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
HIELSCHER, KEVIN ☒ Delete
PO BOX 38-7690 POINSETTA AVE
ALTURAS FL 33820

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Trustee ☒ Change ☐ Addition
Danny Nation
PO Box 38 - 7690 Poinsetta Ave
Alturas, FL 33820

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ALBRITTON, DENNIS ☒ Delete
PO BOX 38 - 7690 POINSETTA AVE
ALTURAS FL 33820

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Trustee ☒ Change ☐ Addition
Virginia Maynard
PO Box 38 - 7690 Poinsetta Ave
Alturas, FL 33820

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MABERRY, WAYNE ☐ Delete
PO BOX 38 - 7690 POINSETTA AVE
ALTURAS FL 33820

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Secretary ☐ Change ☒ Addition
Pamela Trowbridge
PO Box 38 - 7690 Poinsetta Ave
Alturas, FL 33820

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
HIELSCHER, RAYMURL ☐ Delete
2555 OAK DRIVE
ALTURAS FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
HIELSCHER, CARL ☐ Delete
2555 OAK DRIVE
ALTURAS FL 33820

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
HAMMOND, MICHAEL ☐ Delete
812 AUSTIN CIRCLE
BARTOW FL 33830

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Pamela Trowbridge Secretary
Pamela Trowbridge 2/29/04 537-1049