

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 23, 2005 08:00 AM
Secretary of State

DOCUMENT # N96000003921	
1. Entity Name AIRLINE BAPTIST CHURCH, INC.	
Principal Place of Business P.O. BOX 1450 SR-3543-A MAYO, FL 32066	Mailing Address P.O. BOX 1450 SR-3543-A MAYO, FL 32066



03122005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2343711	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

TRAWICK, PAUL
ROUTE 2 BOX 159
MAYO, FL 32060

**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 reinstating)

DATE _____

**Filing Fee is \$61.25
Due by May 1, 2005**

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	P KERBY, EVERETT RT 3, BOX 61 N/A MAYO, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP LAND, WROTEN 1306 NE CR 361 MAYO, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S BADGER, JOHN PO BOX 811 MAYO, FL 32066
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T SLADE, ROLLIE RT 2 BOX 335 MAYO, FL 32066
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HEWETT, CHUCK 1916 NE CR 400 MAYO, FL 32066
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LAWSON, DEREK RT. 2 BOX 1086 MAYO, FL 32066

000000273738
03/23/05-80040-004 61.25

**DO NOT WRITE
IN THIS SPACE**

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: Edgar Howell Koon **3-12-05** **386-294-2676**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #