

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

FILED
Feb 19, 2004 8:00 am
Secretary of State

02-19-2004 90029 022 ****61.25

DOCUMENT # N97000001581

1. Entity Name

FIRST BAPTIST CHURCH OF SANDERSON, INC.



Principal Place of Business
229 SOUTH
SANDERSON FL 32087

Mailing Address
P.O. BOX 127
SANDERSON FL 32087

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
59-3042461

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

WILSON, JERRY
CLETE HARVEY RD.
RT. 1 BOX 2320
GLEN ST. MARY FL 32040

Name
Jerry Wilson
Street Address (P.O. Box Number is Not Acceptable)
12132 Clete Harvey Rd
City
Glen St Mary FL Zip Code
32040

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

TITLE PD
NAME WILSON, JERRY
STREET ADDRESS RT. 1, BOX 2320 CLETE HARVEY RD.
CITY-ST-ZIP GLEN ST MARY FL ☐ Delete

TITLE V
NAME GENE, SALLIE
STREET ADDRESS RT. 1 BOX 3360
CITY-ST-ZIP GLEN SAINT MARY FL 32040 ☐ Delete

TITLE D
NAME PREVATT, NORMA
STREET ADDRESS 2016 TEAL LAND
CITY-ST-ZIP MIDDLEBURG FL 32068 ☒ Delete

TITLE TD
NAME LESLIE, MARY R
STREET ADDRESS 10429 WOOSTER DR
CITY-ST-ZIP JACKSONVILLE FL 32218 ☐ Delete

TITLE SD
NAME CHRISTMAS, NINA
STREET ADDRESS 4558 S CR 229
CITY-ST-ZIP GLEN SAINT MARY FL 32040 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS 12132 Clete Harvey Rd
CITY-ST-ZIP Glen St Mary FL 32040 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 1633 S. Earnie Bryant Rd
CITY-ST-ZIP Glen St Mary FL 32040 ☒ Change ☐ Addition

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

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

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

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:

Nina Christmas Nina Christmas

02/02/04

904-275-2593

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #