2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE

Secretary of State DOCUMENT # N97000005777 02-02-2006 90077 023 ****61.25 1. Entity Name NORWOOD BAPTIST CHURCH, INC., JACKSONVILLE, Maifing Address Principal Place of Business 6505 NORWOOD AVE JACKSONVILLE FL 32208 6505 NORWOOD AVE JACKSONVILLE FL 32208 2. Principal Place of Business 3. Mailing Address 6505 NOTWOOD A Jam as Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) Applied For City & State City & State 4. FEI Number 59-1205797 Not Applicable jacksonu. Country Ziα \$8.75 Additional 5. Certificate of Status Desired 208 war Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) MURRAY, A DARREL 5655 SALERNO RD JACKSONVILLE FL 32244 City 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. DATE (NOTE: Registered Agent signature required when reinstating) Mark (Miles) FILE NOW: FEE IS \$61.25 \$5.00 May Be 9. Election Campaign Financing Make Check Payable to Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS TITLE ☐ Channe ☐ Addition TITLE ☐ Delete MURRAY, A. DARREL NAME NAME 5655 SALERNO RD STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32244 CITY-ST-ZIP CITY-ST-ZIP VD ☐ Delete TITLE ☐ Change ☐ Addition TITLE ROBERTSON, JAMES NAME NAME 471 W 70TH ST STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32208 CITY-ST-ZIP CITY-ST-ZIP Betty Patterson 1039 Stark St Addition Delete TITE Change TITLE HILLING, RUBY NAME NAME STREET ADDRESS STREET ADDRESS 923 CARROLTON RD 32208 Jacksonville FL CITY-ST-ZIP JACKSONVILLE FL 32208 CITY-ST-ZIP TD TITLE ☐ Change Addition ☐ Delete TITLE NAME NAME WILLIAMS, MARY STREET ADDRESS 10907 REGENCY DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32218 ☐ Channe Addition TITI F TITLE ☐ Delete PATTERSON, JACK NAME NAME 1039 START ST STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32208 CITY-ST-ZIP CITY-ST-ZIP Addition Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 ather like empowered.

FILED

Feb 02, 2006 8:00 am

UTIAN 1-21-06 604)3845670