


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 08:00 AM
Secretary of State

DOCUMENT # N97000006928	
1. Entity Name FIRST BAPTIST CHURCH OF WINDERMERE FOUNDATION, INC.	

Principal Place of Business 300 MAIN STREET WINDERMERE, FL 34786	Mailing Address 300 MAIN STREET WINDERMERE, FL 34786
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DO NOT WRITE IN THIS SPACE



04082005 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-1263694	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent MATHESON, MARK E 300 MAIN STREET WINDERMERE, FL 34786
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PARRISH, DOUG SR 2836 HIGHLAND VIEW CIR CLERMONT, FL 34711
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MATHESON, DR. MARK E 6408 MERRICK LANDING WINDERMERE, FL 34786
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS, KATHY 6005 DOWN POINT LANE WINDERMERE, FL 34786
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RODGERS, JOHN 3735 LAKE BAYNAK RD WINDERMERE, FL 34786
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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000000311815
04/18/05-80062-001 61.25

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: <u>Mule E Matheson</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	4/12/2005 Date	Daytime Phone #
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