


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008 08:00 AM
Secretary of State

DOCUMENT # N98000003583

1. Entity Name
ST. NICHOLAS BETHEL BAPTIST CHURCH INC.



Principal Place of Business
**2606 SAN DIEGO ROAD
 JACKSONVILLE, FL 32207**

Mailing Address
**2606 SAN DIEGO ROAD
 JACKSONVILLE, FL 32207**

DO NOT WRITE IN THIS SPACE



04272008 No Chg-NP CR2E037 (4/06)

4. FEI Number
59-2874669

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**BROWN, AUDREY J
 5013 WINCHESTER DR. SOUTH
 JACKSONVILLE, FL 32217**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
 Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

U00000938097
 05/27/08-80077-012 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CC BROWN, AUDREY J 5013 WINCHESTER DRIVE SOUTH JACKSONVILLE, FL 32217
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCTB BROWN, ROBERT 5013 WINCHESTER DR. SOUTH JACKSONVILLE, FL 32217
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCOD RILEY, JAMES 3705 NORTH CANAL STREET JACKSONVILLE, FL 32209
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCTB BAXTER, JAMES E 12891 FENNEL AVE MIDDLEBURG, FL 32068
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LITTLE, VERONICA 1617 SPRINGS OAK LANE JACKSONVILLE, FL 32221
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 other like employees.

SIGNATURE:  **4/28/08**

 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #