

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

FILED
Mar 08, 2006 8:00 am
Secretary of State

03-08-2006 90173 029 ****61.25

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1. Entity Name

PLEASANT VALLEY BAPTIST CHURCH OF PONCE DE LEON, INC.



Principal Place of Business

**3100 STATE HWY. 81 SOUTH
PONCE DE LEON FL 32455**

Mailing Address

**3100 STATE HWY. 81 SOUTH
PONCE DE LEON FL 32455**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

36-4143608

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

**SPENCE, ROBERT
9672 ROCKHILL ROAD
PONCE DE LEON FL 32455**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reconstituting)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

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 ☐ Delete
NAME **D HURLEY, OLIVER**
STREET ADDRESS **231 CHARLES RUSHING ROAD**
CITY-ST-ZIP **PONCE DE LEON FL 32455**

TITLE ☐ Delete
NAME **D SPENCE, ROBERT**
STREET ADDRESS **9672 ROCK HILL ROAD**
CITY-ST-ZIP **PONCE DE LEON FL 32455**

TITLE ☐ Delete
NAME **D MCGUIER, JIMMY**
STREET ADDRESS **PO BOX 401**
CITY-ST-ZIP **PONCE DE LEON FL 32455**

TITLE ☐ Delete
NAME **D RUSHING, GRADY**
STREET ADDRESS **353 OLD GRIST MILL RD**
CITY-ST-ZIP **PONCE DE LEON FL 32455**

TITLE ☐ Delete
NAME **C BIDDLE, HORTON**
STREET ADDRESS **967 ROCKHILL RD**
CITY-ST-ZIP **PONCE DE LEON FL 32455**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE ☒ Change ☐ Addition
NAME **Mc Callers**
STREET ADDRESS
CITY-ST-ZIP

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

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 other like empowered.

SIGNATURE:

Robert Spence

2-19-06