

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 28, 2005 8:00 am
Secretary of State

02-28-2005 90215 030 ****61.25

DOCUMENT # N99000004928

1. Entity Name

TRUSTEES, SPRINGFIELD BAPTIST CHURCH, INC.



Principal Place of Business

3615 EAST THIRD STREET
PANAMA CITY FL

Mailing Address

3615 EAST THIRD STREET
PANAMA CITY FL

50019606



1st MOORE

CR2E037 (10/04)

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

59-0976514

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

LITTLE, JAMES W
2726 EAST 19TH COURT
PANAMA CITY FL 32405-7202

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 reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PT ☐ Delete
NAME LITTLE, JAMES W
STREET ADDRESS 2726 EAST 19TH COURT
CITY-ST-ZIP PANAMA CITY FL 32405-7202

TITLE VT ☐ Delete
NAME HARRELL, JAMES
STREET ADDRESS 5811 LAKE DRIVE
CITY-ST-ZIP PANAMA CITY FL 32404

TITLE VT ☒ Delete
NAME CALFEE, HUDSON
STREET ADDRESS 300 SOUTH GAY AVENUE
CITY-ST-ZIP PANAMA CITY FL 32404

TITLE ST ☒ Delete
NAME GILLIKIN, CHARLES F
STREET ADDRESS 100 MARTIN LAKE DRIVE
CITY-ST-ZIP PANAMA CITY FL 32404

TITLE TT ☐ Delete
NAME GLISSON, JAMES
STREET ADDRESS 542 POWELL AVENUE
CITY-ST-ZIP PANAMA CITY FL 32404

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

TITLE VT ☐ Change ☒ Addition
NAME Brown, Calvin
STREET ADDRESS 7234 Campflowers Rd.
CITY-ST-ZIP Youngstown, FL 32466

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 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:

James W. Little
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James W. Little

02-10-05

850-785-5041

Date

Daytime Phone #