
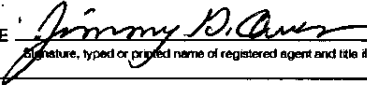



2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2004 8:00 am
Secretary of State

02-20-2004 90011 012 ****70.00

DOCUMENT # N99000005314					
1. Entity Name FIRST BAPTIST CHURCH OF CRESTVIEW, INC.					
Principal Place of Business 102 EAST CEDAR AVENUE CRESTVIEW, FL 32536			Mailing Address 798 PEARL ST., NORTH CRESTVIEW, FL 32536		
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 59-0737873	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
OWEN, JIMMY G 798 PEARL STREET, NORTH CRESTVIEW, FL 32536			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 		JIMMY G. OWEN		DATE	
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	CD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OWEN, JIMMY G		NAME		
STREET ADDRESS	798 PEARL ST., N		STREET ADDRESS		
CITY-ST-ZIP	CRESTVIEW, FL 32536		CITY-ST-ZIP		
TITLE	VCD	<input checked="" type="checkbox"/> Delete	TITLE	VCD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RHUDEN, LAWTON L JR		NAME	JIMMY L. LUNDY	
STREET ADDRESS	798 PEARL ST., N		STREET ADDRESS	798 PEARL ST., N	
CITY-ST-ZIP	CRESTVIEW, FL 32536		CITY-ST-ZIP	CRESTVIEW, FL 32536	
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DAVIS, HAYWARD J		NAME	LARRY EWARDS	
STREET ADDRESS	798 PEARL ST., N		STREET ADDRESS	798 PEARL ST., N	
CITY-ST-ZIP	CRESTVIEW, FL 32536		CITY-ST-ZIP	CRESTVIEW, FL 32536	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 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: 				850-682-2544	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	

