


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2006 8:00 am
Secretary of State

03-17-2006 90135 045 ****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
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
HOUSE, JAKE 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2006		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	HOUSE, JAKE			NAME	
STREET ADDRESS	798 PEARL ST., N			STREET ADDRESS	
CITY-ST-ZIP	CRESTVIEW, FL 32536			CITY-ST-ZIP	
TITLE	VCD	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAYWARD, DAVIS			NAME	
STREET ADDRESS	798 PEARL ST. N			STREET ADDRESS	
CITY-ST-ZIP	CRESTVIEW, FL 32536			CITY-ST-ZIP	
TITLE	SD	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUSH, JIM			NAME	
STREET ADDRESS	798 PEARL ST., N			STREET ADDRESS	
CITY-ST-ZIP	CRESTVIEW, FL 32536			CITY-ST-ZIP	
TITLE	AT	<input type="checkbox"/> Delete		TITLE	TREASURER <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOYKIN, MARILYN			NAME	
STREET ADDRESS	798 PEARL ST., N			STREET ADDRESS	
CITY-ST-ZIP	CRESTVIEW, FL 32536			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 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 empowered.					
SIGNATURE: <u>Jake House (JAKE HOUSE)</u>		3-14-06		860-682-2544	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	