

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006615

FILED  
Apr 26, 2006  
Secretary of State

**Entity Name:** NORTHSIDE BAPTIST CHURCH OF APOPKA, INC.

**Current Principal Place of Business:**

413 W WELCH RD  
APOPKA, FL 32704

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 1393  
APOPKA, FL 327041393

**New Mailing Address:**

**FEI Number:** 59-3629988

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

YATES, DON D  
PO BOX 1393  
APOPKA, FL 32704 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: CHAPIMAN, RICHARD  
Address: 521 BERNT TREE LN  
City-St-Zip: APOPKA, FL 32712

Title: D ( ) Delete  
Name: USTLER, JEANNE  
Address: 130 CALDWELL STREET  
City-St-Zip: APOPKA, FL 32712

Title: VP ( ) Delete  
Name: GEMMEL, EVIE  
Address: 3841 CALEDONIA AVE  
City-St-Zip: APOPKA, FL 32712

Title: S ( ) Delete  
Name: USTLER, LOUISE  
Address: 397 WEST DIXIE HIGHWAY  
City-St-Zip: APOPKA, FL 32712

Title: D ( ) Delete  
Name: BOLTON, JOHN D  
Address: 3810 LORNE COURT  
City-St-Zip: APOPKA, FL 32712

Title: D ( ) Delete  
Name: SMITH, PHIL  
Address: 1628 SUNRIDGE DR  
City-St-Zip: APOPKA, FL 32703

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: CLEGHORN, J D  
Address: PO BOX 98  
City-St-Zip: PLYMOUTH, FL 32768

Title: D (X) Change ( ) Addition  
Name: USTLER, LOUISE  
Address: 397 WEST DIXIE HIGHWAY  
City-St-Zip: APOPKA, FL 32712

Title: VP (X) Change ( ) Addition  
Name: CAIN, CRAIG  
Address: 28239 SHIRLEY SHORES DR.  
City-St-Zip: TAVARES, FL 32778

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: FLOYD, ROGER  
Address: PO BOX 61  
City-St-Zip: ZELLWOOD, FL 32798

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DON YATES

RA

04/26/2006

Electronic Signature of Signing Officer or Director

Date