

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703177

FILED
Mar 17, 2020
Secretary of State
4233117889CC

Entity Name: FIRST BAPTIST CHURCH OF INVERNESS, INC.

Current Principal Place of Business:

550 PLEASANT GROVE RD
INVERNESS, FL 34452-5789

Current Mailing Address:

550 PLEASANT GROVE RD
INVERNESS, FL 34452-5789 US

FEI Number: 59-1265586

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CERNICH, JAMES
3624 E. COUNTRY SIDE DR.
INVERNESS, FL 34452 US

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: JAMES CERNICH

03/17/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name CERNICH, JAMES
Address 3624 E. COUNTRY SIDE DR.
City-State-Zip: INVERNESS FL 34452

Title D.
Name LUCY, JAMES
Address 2879 E. MARCIA ST.
City-State-Zip: INVERNESS FL 34453

Title VP
Name DAVIS, ERVIN
Address 3500 E OAK TRACE PATH
City-State-Zip: INVERNESS FL 34452

Title D
Name MCFARLIN, JERRY
Address 4341 N DECKWOOD
City-State-Zip: BEVERLY HILLS FL 34465

Title SD
Name DAVIS, CAROL
Address 10591 E BALSAM LANE
City-State-Zip: INVERNESS FL 34450

Title D
Name TAYLOR, JAMES
Address 1855 CORALBERRY LANE
City-State-Zip: INVERNESS FL 34453

Title D
Name PRATT, MARJORIE
Address 4020 N. ROSCOE RD.
City-State-Zip: HERNANDO FL 34442

Title D.
Name THEROUX, JOSEPH
Address 953 W.OLYMPIA STREET
City-State-Zip: HERNANDO FL 34442

Continues on page 2

I hereby 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 all other like empowered.

SIGNATURE: JERRY MCFARLIN

DIRECTOR

03/17/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	D
Name	HARRELSON, ALBERT
Address	5112 S. POINTE DRIVE
City-State-Zip:	INVERNESS FL 34450