

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757446

Entity Name: FIRST BAPTIST CHURCH OF FLAGLER BEACH, INC.

Current Principal Place of Business:

300 NORTH CENTRAL AVENUE
FLAGLER BCH., FL 32136

Current Mailing Address:

P. O. BOX 839
FLAGLER BCH., FL 32136

FEI Number: 59-2342953

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TOBER, DEIDRA ANN
300 NORTH CENTRAL AVENUE
FLAGLER BCH., FL 32136 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: DEIDRA TOBER

02/06/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TRUSTEE
Name BARR, BONNIE
Address 1220 LAMBERT AVE
City-State-Zip: FLAGLER BEACH FL 32136

Title TREASURER
Name MILSTEAD, LYNN
Address 2653 ANNETTE ST.
City-State-Zip: FLAGLER BEACH FL 32136

Title CHAIRMAN OF DEACONS
Name GIBSON, CASEY
Address 45 WHITE DOVE LN
City-State-Zip: PALM COAST FL 32164

Title ASST. TREASURER
Name CANTRELL, JOYCE
Address 1239 S. CENTRAL AVE
City-State-Zip: FLAGLER BEACH FL 32136

Title CO-TRUSTEE
Name TEATER, NANCY
Address 111 AVALON AVE
City-State-Zip: FLAGLER BEACH FL 32136

Title PASTOR
Name THOMAS, HOWARD CHET
Address 20 BIG BEAR LN
City-State-Zip: PALM COAST FL 32137

Title SECRETARY
Name TOBER, DEIDRA ANN
Address 1514 N. BEACH ST.
City-State-Zip: ORMOND BEACH FL 32174

Title DEACON
Name HINTON, JIM
Address 64 NAUTILUS DR.
City-State-Zip: FLAGLER BEACH FL 32136

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: DEIDRA ANN TOBER

SECRETARY

02/06/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DEACON
Name STANWICK, WALTER
Address 33 ELLSWORTH DR.
City-State-Zip: PALM COAST FL 32137