2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757446

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

FILED
Jan 17, 2018
Secretary of State
CC9340481057

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 01/17/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title	DEACON, CO-TRUSTEE	Title	TREASURER
Name	BARR, WILLIAM	Name	MILSTEAD, LYNN
Address	1220 LAMBERT AVE	Address	2653 ANNETTE ST.

City-State-Zip: FLAGLER BEACH FL 32136 City-State-Zip: FLAGLER BEACH FL 32136

Title ASST. TREASURER Title **DEACON** Name CANTRELL, JOYCE GIBSON, CASEY Name 45 WHITE DOVE LN Address 1239 S. CENTRAL AVE Address City-State-Zip: FLAGLER BEACH FL 32136 PALM COAST FL 32164 City-State-Zip:

TitleDEACON, CFOTitleCO-TRUSTEENameHERNE, DAVIDNameWILSON, ALICEAddress13 SEDAN PLAddress23 TREETOP CIRCLE

City-State-Zip: PALM COAST FL 32164 City-State-Zip: ORMOND BEACH FL 32174

Title CO-TRUSTEE Title PASTOR

Name TEATER, NANCY Name THOMAS, HOWARD CHET

Address 111 AVALON AVE Address 310 N 5TH STREET

City-State-Zip: FLAGLER BEACH FL 32136 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 TOBER SECRETARY 01/17/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title SECRETARY

Name TOBER, DEIDRA ANN

Address 3228 GALTY CIR.

City-State-Zip: ORMOND BEACH FL 32174