

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759369

Entity Name: FIRST BAPTIST CHURCH OF EASTPOINT, INC.**Current Principal Place of Business:**447 AVE A
275 HWY 98
EASTPOINT, FL 32328**Current Mailing Address:**PO BOX 611
EASTPOINT, FL 32328**FEI Number:** 59-2990266**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CARROLL, EVELYN L
447 AVE A
EASTPOINT, FL 32328 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**Title D
Name BROWN, MAX
Address 25 INDIAN MOUNDS DR.
City-State-Zip: EASTPOINT FL 32328Title D
Name CROSBY, CHARLIE
Address 102 WHISPERING PINES DR
City-State-Zip: EASTPOINT FL 32328Title D
Name PENDLETON, DORIS
Address 1199 BLUFF RD
City-State-Zip: APALACHICOLA FL 32320Title D
Name CROSBY, RALPH
Address 299 TALLAHASSEE ST.
City-State-Zip: EASTPOINT FL 32328Title TREA
Name CARROLL , EVELYN L
Address 275 HWY 98
P.O. BOX 195
City-State-Zip: EASTPOINT FL 32328

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: EVELYN L. CARROLL**TREASURER****02/04/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date