

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20541

**FILED**  
**Feb 05, 2024**  
**Secretary of State**  
**6689816037CC**

**Entity Name:** FIRST BAPTIST CHURCH OF CHATTAHOOCHEE

**Current Principal Place of Business:**

503 SOUTH MAIN STREET  
CHATTAHOOCHEE, FL 32324

**Current Mailing Address:**

503 SOUTH MAIN STREET  
CHATTAHOOCHEE, FL 32324 US

**FEI Number:** 59-1291395

**Certificate of Status Desired:** No

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

HOLLOWAY, MARCUS  
474 OLD SCOTT LANE  
CHATTAHOOCHEE, FL 32324 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:** MARCUS HOLLOWAY

02/05/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DEACON  
Name POYTHRESS, RAY  
Address 400 CEDAR RD.  
City-State-Zip: CHATTAHOOCHEE FL 32324

Title DEACON  
Name HOLLOWAY, MARCUS  
Address 474 OLD SCOTT LANE  
City-State-Zip: CHATTAHOOCHEE FL 32324

Title DEACON  
Name TURNAGE, DAN  
Address 188 CORPS AIRPORT RD  
City-State-Zip: BAINBRIDGE GA 39819

Title DEACON  
Name MCCORMICK, MIKE  
Address 512 S. BOLIVAR ST.  
City-State-Zip: CHATTAHOOCHEE FL 32324

Title DEACON  
Name GIBSON, ROBERT  
Address 25 W MARION ST.  
City-State-Zip: CHATTAHOOCHEE FL 32324

Title DEACON  
Name ALLEN, MARK  
Address 121 RICE RD.  
City-State-Zip: CHATTAHOOCHEE FL 32324

*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:** MARCUS HOLLOWAY

CHAIRMAN OF DEACONS 02/05/2024

Electronic Signature of Signing Officer/Director Detail

Date