

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N42829

**Entity Name:** FLORIDA BAPTIST FINANCIAL SERVICES, INC.

**Current Principal Place of Business:**

8383 BAYMEADOWS WAY  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

P.O. BOX 23069  
JACKSONVILLE, FL 32241-3069 US

**FEI Number: 59-3063682**

**Certificate of Status Desired: No**

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

WHEELER, RICHARD  
8383 BAYMEADOWS WAY  
JACKSONVILLE, FL 32256 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: RICHARD WHEELER**

**02/18/2022**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            WHEELER, RICHARD  
Address        P.O. BOX 23069  
City-State-Zip: JACKSONVILLE FL 32241-3069

Title            DIRECTOR  
Name            BRAY, ROBERT V  
Address        20175 KINDERKEMAC AVENUE  
City-State-Zip: PORT CHARLOTTE FL 33952

Title            DIRECTOR  
Name            ANDERSON, LINDA  
Address        9526 WATERFORD ROAD  
City-State-Zip: JACKSONVILLE FL 32257

Title            DIRECTOR  
Name            HUXFORD, CLIFFORD  
Address        9765 SW 146 STREET  
City-State-Zip: MIAMI FL 33176

Title            DIRECTOR  
Name            BYRD, ALBERT  
Address        7135 TONGA DRIVE  
City-State-Zip: JACKSONVILLE FL 32216

Title            DIRECTOR  
Name            WILKINSON, LESTER  
Address        10 FIRST BAPTIST PARKWAY  
City-State-Zip: DAYTONA BEACH FL 32124

Title            DIRECTOR  
Name            WAUGH, NITA  
Address        11359 KINGSLEY MANOR WAY  
City-State-Zip: JACKSONVILLE FL 32225

*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: RICHARD WHEELER**

**PRESIDENT**

**02/18/2022**

Electronic Signature of Signing Officer/Director Detail

Date