

**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Feb 10, 2004 8:00 am
Secretary of State

02-10-2004 90028 044 ****61.25

DOCUMENT # 766492

1. Entity Name
EAGLES' NEST BAPTIST CHURCH, INC.



Principal Place of Business Mailing Address
4650 EAGLES NEST ROAD **4650 EAGLES NEST ROAD**
FRUITLAND PARK FL 34731 **FRUITLAND PARK FL 34731**

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country



MOORE CR2E037 (11/03)

4. FEI Number Applied For
59-2313869 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
BROADDUS, ERNEST
05326 EAGLES NEST ROAD
FRUITLAND PARK FL 34731

7. Name and Address of New Registered Agent
Name
Darrell Looney
Street Address (P.O. Box Number is Not Acceptable)
544 Golfview Drive
Leesburg FL 34748
City **FL** Zip Code
Leesburg **34748**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Darrell Looney* February 4, 2004
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	WHITLOCK, TOMMY	
STREET ADDRESS	17672 SE 108TH TERRACE	
CITY-ST-ZIP	SUMMERFIELD FL 34491	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	LOONEY, DARRELL	
STREET ADDRESS	544 GOLFVIEW COURT	
CITY-ST-ZIP	LEESBURG FL 34748	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	BROADDUS, ERNEST	
STREET ADDRESS	5340 EAGLES NEST ROAD	
CITY-ST-ZIP	FRUITLAND PARK FL 34731	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Leonard Surklow	
STREET ADDRESS	05436 Sunset Drive	
CITY-ST-ZIP	Fruitland Park FL 34731	
TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Tommy Whitlock	
STREET ADDRESS	17672 SE 108th Terrace	
CITY-ST-ZIP	Summerfield FL 34491	
TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Darrell Looney	
STREET ADDRESS	544 Golfview Drive	
CITY-ST-ZIP	Leesburg FL 34748	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Darrell Looney* February 4, 2004 352-326-8441
Signature and typed or printed name of signing officer or director Date Daytime Phone #