2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703957

Entity Name: FLORIDA BAPTIST SCHOOLS, INC.

FILED Feb 19, 2007 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

706 DEW BLOOM RD BRANDON, FL 33511

Current Mailing Address: New Mailing Address:

P.O. BOX 2758 BRANDON, FL 33509

FEI Number: 23-7202810 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

MCALISTER, RAYMOND 706 DEW BLOOM ROAD BRANDON, FL 33511

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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete MCALISTER, RAYMOND MCALISTER, RAYMOND DR. Name: Name: 706 DEW BLOOM RD. Address: 706 DEW BLOOM RD. Address: City-St-Zip: BRANDON, FL 33511 City-St-Zip: BRANDON, FL 33511

Title: S/TR () Delete Title: (X) Change () Addition Name: READ, JOHNNY M Name: BROWN, EDWARD K DR.

Address: 1539 AUBURN OAKS CIRCLE Address: 4400 BURKLEY ROAD City-St-Zip: AUBURNDALE, FL 33823 City-St-Zip: AUBURNDALE, FL 33823

Title: () Delete Title: S/TE (X) Change () Addition JACKSON, MARVIN Name: JACKSON, MARVIN Name:

504 S. OAKWOOD AVE. 504 S. OAKWOOD AVE. Address: Address: City-St-Zip: BRANDON, FL 33511 City-St-Zip: BRANDON, FL 33511

Title: TR () Delete Title: ΤE (X) Change () Addition GALLUPS, BOB Name: GURGEL, DAVID Name:

1808 ARIANA BLVD. 1310 NE SECOND STREET Address: Address: City-St-Zip: AUBURNDALE, FL 33823 City-St-Zip: MULBERRY, FL 33860

Title: () Delete Title: (X) Change () Addition

GARNER, ALBERT GARNER, ALBERT DR. Name: Name: 6210 ORANGE VALLEY CIRCLE 6210 ORANGE VALLEY CIRCLE Address: Address:

City-St-Zip: LAKELAND, FL 33813 City-St-Zip: LAKELAND, FL 33813

Title: () Delete Title: (X) Change () Addition LANIER, W. CLYDE DR. LANIER, CLYDE W Name: Name: Address: 12300 OLD GRADE ROAD Address: 12300 OLD GRADE ROAD POLK CITY, FL 33868 City-St-Zip: POLK CITY, FL 33868 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RAYMOND MCALISTER Ρ 02/19/2007