

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # 732331

1. Entity Name

FAITH BAPTIST CHURCH OF LAKE BUTLER, FLORIDA,
INC.



Principal Place of Business

104 SW 12TH AVE
LAKE BUTLER, FL 32054

Mailing Address

POB 67
LAKE BUTLER, FL 32054

DO NOT WRITE IN THIS SPACE

FILED
Jul 24, 2008 08:00 AM
Secretary of State



07182008 No Chg-NP

CR2E037 (4/06)

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MCDAVID, TERRY
200 NORTH MARION STREET
LAKE CITY, FL

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

Filing Fee is \$61.25
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000956240
07/24/08-80004-019 61.25

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TD
MELTON, OTIS
307 S. CHURCH ST.
STARKE, FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
OD
BRIGHT, BILL
12781 ST RD 100W
LAKE BUTLER, FL 32054

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
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CITY - ST - ZIP

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 info empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

OTIS MELTON

7-20-08

Date

386-496-3384

Daytime Phone #