2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747759

FILED Apr 27, 2007 Secretary of State

Entity Name: FIRST BAPTIST CHURCH OF GENEVA, FLORIDA, INC.

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
325 FIRST P. O. BOX GENEVA,					
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
325 FIRST P. O. BOX GENEVA,			P.O. BOX 350 GENEVA, FL 3273:	2	
FEI Number	: 59-2181405	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Address	s of New Registered Agent:	
200 W FIF	H, KENNETH RST ST.), FL 32771	W. US			
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registe	ered office or registered agent, or both,	
SIGNATU					
SIGNATUI		nic Signature of Registered Age	ent	Date	
				Date GES TO OFFICERS AND DIRECTOR:	
OFFICER Fitle: Name: Address: City-St-Zip:	Electro	ETORS:) Delete ED			
OFFICER Title: Name: Address:	Electro S AND DIRECT T (WILLIAMS, FF 280 3RD ST GENEVA, FL: T (HARRISON, R.	ETORS:) Delete ED 82732) Delete AYMOND W RANCH POINT	ADDITIONS/CHAN Title: Name: Address:	GES TO OFFICERS AND DIRECTOR	
OFFICER Title: Name: Nddress: City-St-Zip: Title: Name: Nddress:	T (WILLIAMS, FF 280 3RD ST GENEVA, FL: T (HARRISON, R 1465 LAKEVIE GENEVA, FL:	ETORS:) Delete ED 32732) Delete AYMOND W RANCH POINT 32732) Delete ELEE S BEND	ADDITIONS/CHAN Title: Name: Address: City-St-Zip: Title: Name: Address:	GES TO OFFICERS AND DIRECTORS () Change () Addition	
DFFICER Title: vame: vaddress: Dity-St-Zip: Title: vame: vaddress: Dity-St-Zip: Title: vame: vaddress: Dity-St-Zip: Title: vame: vaddress: vaddress: vaddress: vaddress: vaddress: vaddress: vaddress: vaddress:	T (WILLIAMS, FF 280 3RD ST GENEVA, FL: T (HARRISON, R 1465 LAKEVIE GENEVA, FL: T (WALKER, JOE 4293 CYPRES GENEVA, FL: T (KUDA, STEVE	ETORS:) Delete ED 32732) Delete AYMOND W RANCH POINT 32732) Delete E LEE S BEND 32732) Delete LAKE PARK RD	ADDITIONS/CHAN Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: Address: Address:	() Change () Addition () Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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: FRED WILLIAMS T 04/27/2007