2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## **FILED** Apr 05, 2007 08:00 All Secretary of State DOCUMENT # N00000003720 1. Entity Namo FAITH BIBLE CHURCH INC. Principal Place of Business Mailing Address FIVE CHURCHES ROAD PO B0X 104 SANDERSON FL 32087 SANDERSON FL 32087 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt #, etc. Suite, Apt. #, otc. 1st MOORE CR2E037 (10/06) City & State City & Stato 4. FEI Number Applied For 59-3640359 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WILLIAMS, VIDELL Street Address (P.O. Box Number is Not Acceptable) 14203 GASKINS CIRCLE SANDERSON FL 32087 City Z<sub>I</sub>p Code 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 FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Due By May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ШŒ Delete TITLE ☐ Change U00000632033 NAME THOMAS, LEROY JR NAME. 04/13/07-80035-014 61.25 STREET ADDRESS 1216 E MONROE ST STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP LAKE CITY FL 32025 TITLE TITLE ☐ Defete ☐ Change : ☐ Addition NAME JEFFERSON, PHILLIP NAME STREET ADORESS STREET ADDRESS 14203 GASKIN CIR CITY - ST - ZIP CITY-ST-7IP SANDERSON FL 32087 THILE ☐ Change ■ Addition Delete TITLE. NAME NAME WILLIAMS, VIDELL STREET ADDRESS STREET ADDRESS 14203 GASKIN CIR. CITY-SI-ZIP CITY-ST-ZIP SANDERSON FL 32087 TITLE IIILE ☐ Change ☐ Addition ☐ Delete NAME NAME WILLIAMS, ROSA ANNETTE STREET ADDRESS STREET ADDRESS 241 MICHIGAN AVE CITY-ST-ZIP CITY-ST-ZIP MACCLENNY FL 32063 IIIŒ D ☐ Defete THEF Change Addition NAME. GREEN, WILLIAM JR. NAME STREET ADDRESS 7386 BENNIE GREENS CT. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SANDERSON FL 32087 TITLE ☐ Deleie ☐ Change ☐ Addition TITLE NAME NAME WILLIAMS, MARVA J STREET ADDRESS STREET ADDRESS 14203 GASKINS CIR. CITY - ST - ZIP CITY-ST-ZIP SANDERSON FL 32087

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 eath; 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 oppositions.

SIGNATURE:

4-307 904 275-2770