2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## FILED Apr 14, 2008 08:00 Al Secretary of State DOCUMENT # N00205 HEDGES BAPTIST CHURCH HOLDING COMPANY, INC. Principal Place of Business Mailing Address 85050 SUTTON PLACE P O BOX 515 YULEE FL 32097 YULEE FL 32041-0515 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #. etc. Suite, Apr. #, etc. 1st MOORE CR2E037 (10/07) City & State City & State Applied For 59-3410177 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent **BOWERS, JOYCE** Street Address (P.O. Box Number is Not Acceptable) 96698 CHESTER ROAD YULEE FL 32097 City Zip 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 Fiorioa. Lam familiar with, and accept the obligations of registered agent SIGNATURE Signature, typed or critted name of registered poertiand the Tappicase (NOTE: Registered Agont signature (eg.) (red when reinstating) DATE FILE NOW: FEE IS \$61.25 Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2008 Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delote TITLE U00000836855 🗆 Change HALTER, BARRY L NAME 04/25/08-80016-016 61.25 NAME 622 BIRD RD STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32218 CITY - ST - ZIP CITY-ST-ZiP TITLE ☐ Delate Change Change Addition GURLEY, MARION G NAME NAME 85360 HADDOCK ROAD STREET ADDRESS STREET ADDRESS **YULEE FL 32907** CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition CARTER, THOMAS K NAME 86374 PEEPLES ROAD STREET ADDRESS STREET ADDRESS YULEE FL 32097 CITY-S1-ZIP CITY-ST-ZIP TITLE Delete Change ☐ Addition NAME NA:Æ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete REE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP THUE ☐ Delete TITLE Change Change ☐ Addition NANE NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-SC-ZIP

12. Thereby certify that the information supplied with this filling 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 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: Duy Darry L. Halter 4-09-2008 904-757-7475