

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 10, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # N05000009954**

1. Entity Name  
POPLAR DELL BAPTIST CHURCH, INC.



Principal Place of Business

2631 HIGHWAY 4A  
CENTURY, FL 32535

Mailing Address

2631 HIGHWAY 4A  
CENTURY, FL 32535



03102008 No Chg-NP

CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

59-2370376

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

CHIVERS, GEORGE  
3651 HIGHWAY 4A  
CENTURY, FL 32535

**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)

04/29/08 10:17  
04/29/08 10:17 022 61 25

**Filing Fee is \$61.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
CHIVERS, GEORGE  
3651 HIGHWAY 4A  
CENTURY, FL 32535

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
LANGFORD, GEORGE T.  
2181 WEST STATELINE RD.  
CENTURY, FL 32535

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
FINDLEY, LEE ROY  
3785 HIGHWAY 4A  
CENTURY, FL 32535

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
JOHNSON, EVON  
675 BRIDLE PATH LANE  
FLOMATON, AL 36441

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
MCCALL, WILLARD  
251 POWELL CIR.  
FLOMATON, AL 36441

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
MCCALL, WILLARD  
251 POWELL CIR.  
FLOMATON, AL 36441

**DO NOT WRITE  
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 817, 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-6-08

Date

850-206-3358

Daytime Phone #