

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2008 08:00 AM
Secretary of State

DOCUMENT # N06000006629
 1. Entity Name
WEWAHITCHKA WESTSIDE BAPTIST CHURCH INC.



Principal Place of Business
MORGAN ROAD AND CHURCH STREET
PO BOX 1145
WEWAHITCHKA, FL 32465

Mailing Address
MORGAN ROAD AND CHURCH STREET
PO BOX 1145
WEWAHITCHKA, FL 32465



01262008 No Chg-NP CR2E037 (4/06)

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4. FEI Number 59-2353030	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DAVIS, ANDREW LAMAR
1758 HIGHWAY 22
WEWAHITCHKA, FL 32465

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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature typed or printed name of registered agent and title if applicable

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	P GERBER, DERRICK 198 CASTLEWOOD LANNE WEWAHITCHKA, FL 32465
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CC MCGLON, TRACY 460 OLD TRANSFER RD WEWAHITCHKA, FL 32465
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SS DAVIS, ANDREW LAMAR 1758 HIGHWAY 22 WEWAHITCHKA, FL 32465
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COLLETT, IRENE 154 W LAKEVIEW DR WEWAHITCHKA, FL 32465
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T YOUNG, IVAN E 413 EAST RIVER RD WEWAHITCHKA, FL 32465
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 02/12/08-80040-020 70.00

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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 like empowered.

SIGNATURE: *Andrew Lamar Davis* **ANDREW LAMAR DAVIS** **1/27/08** **850-239-5719**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #