

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09761

FILED
May 02, 2008
Secretary of State

Entity Name: FLORIDA BAPTIST WITNESS, INC.

Current Principal Place of Business:

1230 HENDRICKS AVE.
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

C/O JAMES A SMITH, SR.
1230 HENDRICKS AVE.
JACKSONVILLE, FL 32207

New Mailing Address:

FEI Number: 59-6001102 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SMITH, JAMES R SR
C/O JAMES A SMITH, SR.
1230 HENDRICKS AVENUE
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: D3 () Delete
Name: GREENE, BOB
Address: 2011 SADDLE BROOK DR
City-St-Zip: PENSACOLA, FL 32526

Title: D () Delete
Name: POWELL, RICHARD
Address: 3750 COLONIAL BLVD.
City-St-Zip: FORT MYERS, FL 33912

Title: D () Delete
Name: BUCKLEY, DON W MD
Address: 7411 CAMELE DR
City-St-Zip: PENSACOLA, FL 32504

Title: D () Delete
Name: HOLTON, EDWIN G
Address: 4480 OLD COLONY RD
City-St-Zip: MULBERRY, FL 33860

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JAMES A SMITH SR

AGEN

05/02/2008

Electronic Signature of Signing Officer or Director

_____ Date