2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700589

FILED Jan 17, 2007 Secretary of State

Entity Name: WEST PINES BAPTIST CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business: 4906 MELALUCA LN LAKE WORTH, FL 33463 **Current Mailing Address: New Mailing Address:** 4906 MELALUCA LN LAKE WORTH, FL 33463 FEI Number: 59-1378128 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WELLS, MIKE 9016 PÉRTH RD LAKE WORTH, FL 33467 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BRANDT, JIM Name: Name: 4702 NANCY DR Address: Address: City-St-Zip: LAKE WORTH, FL 33463 City-St-Zip: Title: Title: () Delete () Change () Addition WHITE, DANA Name: Name: Address: 10692 MISTY LN Address: City-St-Zip: WEST PALM BEACH, FL 33411 City-St-Zip: Title: () Delete Title: (X) Change () Addition PARRY, JIM WILLIAMS, BRAD Name: Name: 236 ORANGE TREE DRIVE Address: 104 MIMOSA ST Address: City-St-Zip: ROYAL PALM BEACH, FL 33411 City-St-Zip: ATLANTIS, FL 33462 Title: Title: D () Delete (X) Change () Addition Name: TORRES, JOHN Name: YOST, DON 2621 A BARKLEY W. Address: 1466 ROYAL FORREST CT Address: City-St-Zip: W PALM BCH, FL 33406 City-St-Zip: WEST PALM BEACH, FL 33415 Title: () Delete Title: (X) Change () Addition BROTHERS, TOM, BROTHERS, TOM, Name: Name: 1699 B FOREST LAKES CIR 1699 B FOREST LAKES CIR Address: Address: City-St-Zip: W PALM BCH, FL City-St-Zip: W PALM BCH, FL Title: () Delete Title: () Change () Addition DAWSON, MICHAEL Name: Name: Address: 5289 CANNON WAY Address: W PALM BCH, FL City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: PAUL A. SORBER SP 01/17/2007