

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

FILED
Feb 26, 2008 8:00 am
Secretary of State

02-26-2008 90001 046 ****61.25

DOCUMENT # 702463

1. Entity Name

**FRIENDSHIP BAPTIST CHURCH INCORPORATED OF
MALONE, FLORIDA**



Principal Place of Business

5507 FRIENDSHIP CHURCH RD.
MALONE FL 32445

Mailing Address

5507 FRIENDSHIP CHURCH RD.
P.O. BOX 626
MALONE FL 32445



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E037 (10/07)

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~HOLT, FLOYD~~
6410 HWY 2
BASCOM FL 32423

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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 Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Paul Holt / Holt Floyd

2/13/08

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature may be used when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	☐ Delete
NAME	CALLOWAY, KIMBALL D	
STREET ADDRESS	5931 15TH ST	
CITY-STATE-ZIP	MALONE FL 32445	
TITLE	VD	☐ Delete
NAME	BAXTER, THOMAS	
STREET ADDRESS	5299 BAXTER RD	
CITY-STATE-ZIP	MALONE FL	
TITLE	SD	☒ Delete
NAME	BAXTER, NORMAN	
STREET ADDRESS	53733 11TH STREET	
CITY-STATE-ZIP	MALONE FL	
TITLE	T	☐ Delete
NAME	HOLT, FLOYD	
STREET ADDRESS	6410 HWY 2	
CITY-STATE-ZIP	BASCOM FL 32423	
TITLE	D	☐ Delete
NAME	FLOYD, BEN	
STREET ADDRESS	5894 OLD US RD	
CITY-STATE-ZIP	MALONE FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE	SD	☐ Change ☒ Addition
NAME	Hall, Gregory	
STREET ADDRESS	4293 Hwy 1 Road	
CITY-STATE-ZIP	Malone FL 32445	
TITLE	T	☒ Change ☐ Addition
NAME	Floyd, Holt	
STREET ADDRESS	6410 Hwy 2	
CITY-STATE-ZIP	Bascom FL 32423	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

12. I hereby certify that the information supplied with this filing 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:

Paul Holt / Holt Floyd

2/13/08

850-569-2379