2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702805

FILED Jan 04, 2008 Secretary of State

-		PTIST CHURCH OF BRATT, I			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
4570 W HV BRATT, FL					
Current Mailing Address:			New Mailing Address	New Mailing Address:	
4570 W HV BRATT, FL					
FEI Number:	59-2361151	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:	
AMERSON 5611 WES BRATT, FL	T HWY 4		AMERSON, PETE, III 5991 N. PINE BARRE MCDAVID, FL 32568	N RD. US	
	named entity s e of Florida.	ubmits this statement for the p	urpose of changing its registere	d office or registered agent, or both,	
SIGNATURE: PETE AMERSON, III				01/04/2008	
	Electroni	c Signature of Registered Age	nt	Date	
OFFICERS	S AND DIRECT	ORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	D () BARDIN, EDWA 3640 LAMBERT MC DAVID, FL	BRIDGE RD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DC () WIGGINS, GAR` 3701 MAYHAW WALNUT HILL, F	RD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DC () GOLSON, RICK 6420 W HWY 4 CENTURY, FL 3		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () COLEMAN, SAM 3003 OLD BRAT CENTURY, FL 3	T RD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DC () WIGGINS, GAR 3701 MAYHAW WALNUT HILL, F	RD	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: GARY WIGGINS MR. 01/04/2008