


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

FILED
Mar 28, 2008 8:00 am
Secretary of State

03-28-2008 90024 021 ****61.25

DOCUMENT # 704028

1. Entity Name
FIRST BAPTIST CHURCH OF COTTONDALE, INC.



Principal Place of Business Mailing Address

**POST OFFICE BOX 128
 MAIN AND PARK STREET
 COTTONDALE FL 32431**

**POST OFFICE BOX 128
 MAIN AND PARK STREET
 COTTONDALE FL 32431**



2. Principal Place of Business - No P.O. Box # 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

1st MOORE CR2E037 (10/07)

City & State City & State

4. FEI Number Applied For

59-2326155 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**BRAXTON, JAMES G
 3210 MAGNOLIA STREET
 COTTONDALE FL 32431**

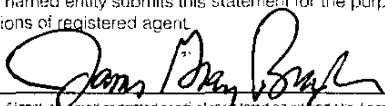
7. Name and Address of New Registered Agent

Name **Same**

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  DATE **MARCH 12, 2008**

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

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	DC	<input type="checkbox"/> Delete
NAME	BRAXTON, JAMES G	
STREET ADDRESS	3210 MAGNOLIA STREET	
CITY-ST-ZIP	COTTONDALE FL 32431	
TITLE	D	<input type="checkbox"/> Delete
NAME	REEVES, DOYLE	
STREET ADDRESS	3188 MAIN STREET	
CITY-ST-ZIP	COTTONDALE FL 32431	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	COMERFORD, GAINER	
STREET ADDRESS	2656 HENDERSON RD.	
CITY-ST-ZIP	COTTONDALE FL 32431	
TITLE	D	<input type="checkbox"/> Delete
NAME	JONES, MIKE	
STREET ADDRESS	1978 BRAXTON RD.	
CITY-ST-ZIP	COTTONDALE FL 32431	
TITLE	D	<input type="checkbox"/> Delete
NAME	DIESNER, BRUCE	
STREET ADDRESS	2886 BUTTERCUP LANE	
CITY-ST-ZIP	COTTONDALE FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	SAPP, WALLACE E	
STREET ADDRESS	195 COMPASS LAKE DRIVE	
CITY-ST-ZIP	ALFORD FL 32420	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-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:  DATE **MARCH 12, 2008**