

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

FILED
Mar 04, 2008 8:00 am
Secretary of State

03-04-2008 90015 033 ****61.25

DOCUMENT # 704105

1. Entity Name

FIRST BAPTIST CHURCH OF SNEADS HOLDING
COMPANY, INC.



Principal Place of Business

GLOSTER AVE & POPE ST
PO BOX 246
SNEADS FL 32460

Mailing Address

GLOSTER AVE & POPE ST
PO BOX 246
SNEADS FL 32460
US



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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

59-2241273

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

VINSON, MARLIN
2044 GLOSTER AVE
SNEADS FL 32460

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

Marlin Vinson

MARLIN VINSON

2/25/08

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

(NOTE: Registered Agent signature required when reconstituting)

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME VINSON, MARLIN
STREET ADDRESS 2044 GLOSTER AVENUE
CITY- ST- ZIP SNEADS FL 32460

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE VD ☐ Delete
NAME PETTIS, EARL
STREET ADDRESS 2083 WOLFE AVE
CITY- ST- ZIP SNEADS FL 32460

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE T ☐ Delete
NAME OWENS, ANN
STREET ADDRESS 1802 SAND BASIN RD
CITY- ST- ZIP GRAND RIDGE FL 32442

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE SD ☒ Delete
NAME PETTIS, EARL
STREET ADDRESS P.O. BOX 1219
CITY- ST- ZIP SNEADS FL 32460

TITLE SD ☒ Change ☐ Addition
NAME James Trent
STREET ADDRESS 1964 Gloster Ave.
CITY- ST- ZIP Sneads, FL 32460

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ 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:

Marlin Vinson

MARLIN VINSON

2/25/08

850-593-6117