

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 08, 2008
Secretary of State

DOCUMENT# 704293

Entity Name: FIRST BAPTIST CHURCH OF MICANOPY INC**Current Principal Place of Business:**709 NE 1ST ST
MICANOPY, FL 32667**New Principal Place of Business:**709 NE CHOLOKKA BLVD.
MICANOPY, FL 32667**Current Mailing Address:**PO BOX 241
MICANOPY, FL 32667**New Mailing Address:****FEI Number:** 59-2164233**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**REDMOND, ERIC M
709 NE 1ST ST
MICANOPY, FL 32667 US**Name and Address of New Registered Agent:**JAMISON, WESLEY
709 NE CHOLOKKA BLVD
MICANOPY, FL 32667 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: WESLEY JAMISON

05/08/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: JAMISON, WESLEY
Address: PO BOX 435
City-St-Zip: MICANOPY, FL 32667**Title:** VD () Delete
Name: REDMOND, ERIC M
Address: 815 SE 128TH DRIVE
City-St-Zip: GAINESVILLE, FL 32641**Title:** SD () Delete
Name: GULICK, ROBERT
Address: 7700 OAK DRIVE
City-St-Zip: KEYSTONE HEIGHTS, FL 32656**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** VD (X) Change () Addition
Name: GULICK, ROBERT
Address: 7700 OAK DRIVE
City-St-Zip: KEYSTONE HEIGHTS, FL 32656**Title:** STD (X) Change () Addition
Name: HAYDEN, BILL
Address: 4435 NW 23RD DR.
City-St-Zip: GAINESVILLE, FL 32605

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: WESLEY JAMISON

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05/08/2008

Electronic Signature of Signing Officer or Director

Date