2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705084

FILED Apr 21, 2008 Secretary of State

Entity Name: SOUTHWOOD BAPTIST CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

372 CAPITAL CIRCLE S.W. 5177 CAPITAL CIRCLE S.W. TALLAHASSEE, FL 32305 TALLAHASSEE, FL 32305

Current Mailing Address: New Mailing Address:

5177 CAPITAL CIRCLE S.W. 372 CAPITAL CIRCLE S.W. TALLAHASSEE, FL 32305 TALLAHASSEE, FL 32305

FEI Number: 59-1505766 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CAIN, RONALD J 5083 LOVINIA DRIVE TALLAHASSEE, FL 32311 US

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

HEARRELL, MICHAEL RAMSEY, HAROLD F Name: Name: 1001 KINGDOM DRIVE Address: 8737 OPAL DRIVE Address: City-St-Zip: TALLAHASSEE, FL 32311 City-St-Zip: TALLAHASSEE, FL 32309

Title: TTR () Delete Title: () Change () Addition

CAIN, RONALD J Name: Name: Address: 5083 LOVINIA DRIVE Address: City-St-Zip: TALLAHASSEE, FL 32311 City-St-Zip:

Title: STR () Delete Title: () Change () Addition

GANTT, DAVID Name: Name: Address: P. O. BOX 6503 Address: City-St-Zip: TALLAHASSEE, FL 32314 City-St-Zip:

Title: VTR () Delete Title: DECO (X) Change () Addition Name: WOODROW, WALKER Name: WOODROW, WALKER W Address: 265 RITCHIE LN Address: 112 MAGG SHEVELLE ROAD City-St-Zip: HAVANA, FL 23233 City-St-Zip: CRAWFORDVILLE, FL 32327

Title: () Delete Title: **TRUS** () Change (X) Addition

MELIN, ROBERT Name: Name: 11363 GRANNY LANE Address: Address: City-St-Zip: City-St-Zip: TALLAHASSEE, FL 32305

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: RONALD J. CAIN **TREA** 04/21/2008