

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706678

FILED
Apr 27, 2007
Secretary of State

Entity Name: FIRST BAPTIST CHURCH OF WEST PALM BEACH, FLORIDA

Current Principal Place of Business:

1101 S. FLAGLER DR
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

1101 S. FLAGLER DR
WEST PALM BEACH, FL 33401

New Mailing Address:

FEI Number: 59-0725538 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KRANZ, MICHAEL T ESQ.
505 SOUTH FLAGLER DRIVE
SUITE 1100
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: BASSETT, BEN
Address: 1860 TRAVIS ROAD
City-St-Zip: WEST PALM BEACH, FL 33406

Title: PD () Delete
Name: FOGLEMAN, ROBERT
Address: 7911 W LAKE DR
City-St-Zip: WEST PALM BEACH, FL 33406

Title: T () Delete
Name: CATER, JOHN J
Address: 2649 TECUMSEH DR
City-St-Zip: WEST PALM BEACH, FL 33409

Title: S () Delete
Name: EASSA, JACK J.
Address: 2640 KITTBUCK WAY
City-St-Zip: WEST PALM BEACH, FL 33411

Title: VPD () Delete
Name: DICKINSON, JON
Address: 9200 PARAGON WAY
City-St-Zip: BOYNTON BEACH, FL 33437

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: DICKINSON, JON
Address: 7311 TILLMAN DRIVE
City-St-Zip: LAKE WORTH, FL 33437

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: ROBERT FOGLEMAN

PD

04/27/2007

Electronic Signature of Signing Officer or Director

Date