2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # 707458

1. Entity Name
OPEN BIBLE BAPTIST CHURCH, INC.

Principal Place of Business	Mailing Address
124 OLD SAN MATEO RD EAST PALATKA, FL 32131 US	P O BOX 698 EAST PALATKA, FL 32131 US

04042008 No Chg-NP   CR2E037 (4/06)

4. FEI Number	Applied For
05-0014900	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HUNT, JOHN R
137 KNOWLES RD
EAST PALATKA, FL

DO NOT WRITE IN THIS SPACE

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 _____

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

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

U000000947169
06/02/08-80004-001 61.25

10.	OFFICERS AND DIRECTORS
TITLE	VP
NAME	BRELAND, R D
STREET ADDRESS	2424 STATE ST
CITY-ST-ZIP	PALATKA, FL 32177
TITLE	T
NAME	METHVIN, DANIEL
STREET ADDRESS	RT 1 YELVINGTON RD
CITY-ST-ZIP	EAST PALATKA, FL 32131
TITLE	S
NAME	HUNT, JOHN R
STREET ADDRESS	137 KNOWLES RD
CITY-ST-ZIP	EAST PALATKA, FL 32131
TITLE	P
NAME	SPRINGER, JOSEPH
STREET ADDRESS	113 MUSKET LANE
CITY-ST-ZIP	SATSUMA, FL 32189
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 _____ Joseph Springer 4/13/08 (386)325-4770

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #