

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708394

FILED  
May 01, 2007  
Secretary of State

**Entity Name:** FIRST BAPTIST CHURCH OF MIMS, INCORPORATED

**Current Principal Place of Business:**

2395 KENTUCKY AVE  
MIMS, FL 32754 US

**New Principal Place of Business:**

**Current Mailing Address:**

2395 KENTUCKY AVE  
MIMS, FL 32754 US

**New Mailing Address:**

**FEI Number:** 59-0992910 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

BARE, CAMDEN R  
3610 GRANTLINE RD., E.  
MIMS, FL 32754 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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BARE, CAMDEN R  
Address: 3610 GRANTLINE RD. EAST  
City-St-Zip: MIMS, FL

Title: SD ( ) Delete  
Name: SHEALY, J.T.  
Address: PO BOX 84  
City-St-Zip: MIMS, FL 32754

Title: TD ( ) Delete  
Name: BIERMAN, LARRY  
Address: 4570 N. US #1  
City-St-Zip: MIMS, FL 32754

Title: V ( ) Delete  
Name: KEY, KIRBY  
Address: 3013 DEVON CT  
City-St-Zip: TITUSVILLE, FL 32796

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: BARE, CAMDEN R  
Address: 3610 GRANTLINE RD. EAST  
City-St-Zip: MIMS, FL 32754 US

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

Title: TD (X) Change ( ) Addition  
Name: BIERMAN, LARRY  
Address: 4570 N. US #1  
City-St-Zip: MIMS, FL 32754 US

Title: V (X) Change ( ) Addition  
Name: KEY, KIRBY  
Address: 3013 DEVON CT  
City-St-Zip: TITUSVILLE, FL 32796 US

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: CAMDEN R. BARE

PD

05/01/2007

Electronic Signature of Signing Officer or Director

Date