

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708711

FILED  
Mar 11, 2008  
Secretary of State

**Entity Name:** FIRST BAPTIST CHURCH OF AUBURNDALE, FLORIDA, INC.

**Current Principal Place of Business:**

300 S. MAIN ST.  
AUBURNDALE, FL 338231102 US

**New Principal Place of Business:**

**Current Mailing Address:**

300 S. MAIN ST.  
P O BOX 367 (338230367)  
AUBURNDALE, FL 338231102 US

**New Mailing Address:**

**FEI Number:** 59-0637835      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SMITH, JAMES R  
116 OWEN CIRCLE, N.  
AUBURNDALE, FL 33823 US

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

OLMERT, BRYAN G  
145 GOODMAN AVENUE  
LAKE ALFRED, FL 33850 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: BRYAN G OLMERT

03/11/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: TD ( ) Delete  
Name: STRICKLER, JOE  
Address: 660 E. THELMA STREET  
City-St-Zip: LAKE ALFRED, FL 33850

Title: PCD ( ) Delete  
Name: SMITH, JAMES R  
Address: 116 OWEN CIRCLE, N.  
City-St-Zip: AUBURNDALE, FL 33823

Title: S ( ) Delete  
Name: WOODARD, MARJORIE D  
Address: 504 MANDY STREET  
City-St-Zip: AUBURNDALE, FL 33823

Title: VCD ( ) Delete  
Name: CHEEK, RICHARD  
Address: 707 HARDY WAY  
City-St-Zip: AUBURNDALE, FL 33823

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

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

Title: PCD (X) Change ( ) Addition  
Name: OLMERT, BRYAN G  
Address: 145 GOODMAN AVENUE  
City-St-Zip: LAKE ALFRED, FL 33850

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

Title: VCD (X) Change ( ) Addition  
Name: KULL, JIM  
Address: 1196 KINSMEN DRIVE  
City-St-Zip: AUBURNDALE, FL 33823

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: BRYAN G OLMERT

PCD

03/11/2008

Electronic Signature of Signing Officer or Director

Date