2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708819

FILED Jul 17, 2008 Secretary of State

Entity Name: FIRST BAPTIST CHURCH OF MARCO ISLAND, INC.

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

1450 WINTERBERRY DR MARCO ISLAND, FL 34145

Current Mailing Address: New Mailing Address:

1450 WINTERBERRY DR MARCO ISLAND, FL 34145

FEI Number: 59-1972918 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:

LUNDQUIST, AARON W
4053 SAWGRASS LN
NAPLES, FL 34145 US
LUNDQUIST, AARON W
101 LAMPLIGHTER DR
MARCO ISLAND, FL 34145 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: AARON W. LUNDQUIST 07/17/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 TD
 () Delete
 Title:
 TD
 (X) Change () Addition

 Name:
 LUNDQUIST, AARON W MR
 Name:
 LUNDQUIST, AARON W MR

 Address:
 4053 SAWGRASS LN
 Address:
 101 LAMPLIGHTER DR

 City-St-Zip:
 NAPLES, FL 34112
 City-St-Zip:
 MARCO ISLAND, FL 34145

Title: PD () Delete Title: () Change () Addition

 Name:
 NEPTUNE, TIMOTHY L MR
 Name:

 Address:
 1313 RIVERHEAD AVE
 Address:

 City-St-Zip:
 MARCO, FL 34145
 City-St-Zip:

Title: () Delete Title: VD () Change (X) Addition

 Name:
 Name:
 HATT, JON

 Address:
 Address:
 1551 BISCAYNE WAY

 City-St-Zip:
 City-St-Zip:
 MARCO ISLAND, FL 34145

Title: () Delete Title: SD () Change (X) Addition

 Name:
 Name:
 TRAUDT, MARY

 Address:
 Address:
 1390 CAXAMBAS CT

 City-St-Zip:
 City-St-Zip:
 MARCO ISLAND, FL 34145

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: AARON W. LUNDQUIST TD 07/17/2008