

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2007 8:00 am
Secretary of State

02-12-2007 90068 032 ****70.00

DOCUMENT # 709501 1. Entity Name VALLEY ROAD BAPTIST CHURCH OF CRESTVIEW, INC.					
Principal Place of Business 1018 VALLEY RD. CRESTVIEW, FL 32539 US			Mailing Address 1018 VALLEY RD. CRESTVIEW, FL 32539 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip Country		City & State Zip Country		4. FEI Number 02-0669511 Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required				02082007 Chg-NP CR2E037 (12/06)	
6. Name and Address of Current Registered Agent BRYAN, JANET S 5741 WILDWOOD RD CRESTVIEW, FL 32536-9544			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 renouncing) DATE					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD FOREHAND, MARY S 5277 GODFREY ST. CRESTVIEW, FL 00000,	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD COOPER, EDWARD 5282 FAIRCHILD ROAD CRESTVIEW, FL 32539	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BRYAN, JANET 5741 WILDWOOD ROAD CRESTVIEW, FL 00000,	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FOREHAND, EDWARD 5277 GODFREY ST. CRESTVIEW, FL 00000,	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIS, TIMOTHY J 2591 VICTORIA PL CRESTVIEW, FL 00000,	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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: <u>Janet S. Bryan</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			<u>February 8, 2007</u> <u>850-682-4513</u> Date Daytime Phone #		