2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#710194

FILED Apr 21, 2008 Secretary of State

Entity Name: FLORIDA CARIBBEAN BAPTIST CONFERENCE, INC.

Current Principal Place of Business:			New Prince	New Principal Place of Business:		
1326 WYN LAKELANI	IGATE DR D, FL 33809	US				
Current Mailing Address:			New Maili	New Mailing Address:		
P O BOX 9 LAKELANI	91865 D, FL 3380418	365 US				
FEI Number: 59-1459720 FEI Number Applied For () FE		FEI Number Not App	licable ()	Certificate of Status Desired ()		
Name and	Address of (Current Registered Agent:	Name and	Address o	f New Registered Agent:	
SMITH, ST 1326 WYN LAKELANI		US				
	named entity e of Florida.	submits this statement for the p	urpose of changing i	ts registered	d office or registered agent, or both,	
SIGNATUR	RE:					
	Electron	nic Signature of Registered Age	ent		Date	
OFFICERS	S AND DIREC	TORS:	ADDITION	IS/CHANGE	S TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD (SMITH, STEVE 1326 WYNGAT LAKELAND, FL	E DR	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	SUTHERLAND,	IEADOW LOOP	Title: Name: Address: City-St-Zip:	T AMES, JEFF 2060 EMPEI KISSIMMEE	ROR DRIVE	
Title: Name: Address: City-St-Zip:	T (AMOS, EUGEN 7500 ALHAMBI MIRAMAR, FL		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	T (HAWKINS, HAI 6904 SUMERB TAMPA, FL 33	RIDGE DR	Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name: Address: City-St-Zip:	T (PHILLIPS, MEF 538 WHISPER LEHIGH ACRE	ING WIND	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name:	S (ROSS, JOANN) Delete	Title: Name:		() Change () Addition	

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: JOANN JOHNSTON ROSS S 04/21/2008