


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90055 022 ****61.25

DOCUMENT # 711651
 1. Entity Name
FIRST BAPTIST CHURCH OF FLORIDA CITY, INC.



Principal Place of Business
**101 SW REDLAND ROAD
 ATTN: JOHN HORBELT
 FLORIDA CITY, FL 33034**

Mailing Address
**101 SW REDLAND ROAD
 ATTN: JOHN HORBELT
 FLORIDA CITY, FL 33034**

40073300



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

04162007 Chg-NP CR2E037 (12/06)

City & State

4. FEI Number
59-1051721

Applied For
 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

HORBELT, JOHN REV
14650 SW 139TH PL 14530 SW 142 CT CIR
MIAMI, FL 33186

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 _____ (NOTE: Registered Agent signature required when reinstating) 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

TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	HAMMOND, MARLENE	
STREET ADDRESS	451 SE 8TH STREET, LOT 75	
CITY-ST-ZIP	HOMESTEAD, FL 33030	
TITLE	PD	<input type="checkbox"/> Delete
NAME	BENNETT, RICHARD	
STREET ADDRESS	1700 NE 3RD STREET	
CITY-ST-ZIP	MIAMI SHORES, FL 33138	
TITLE	P	<input type="checkbox"/> Delete
NAME	HENDRIX, DAVID	
STREET ADDRESS	425 SW 80 AVE	
CITY-ST-ZIP	FLORIDA CITY, FL 33034	
TITLE	D	<input type="checkbox"/> Delete
NAME	HORBELT, JOHN	
STREET ADDRESS	14530 SW 142ND CT CIR	
CITY-ST-ZIP	MIAMI, FL 33186	
TITLE	T	<input type="checkbox"/> Delete
NAME	RHOODES, KENNETH	
STREET ADDRESS	18727 SW 350 ST	
CITY-ST-ZIP	FLORIDA CITY, FL 33034	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: *Rev John Horbelt* *Rev John Horbelt* *4/19/07* *305-247-4541*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #