


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 03, 2008 08:00 AM
Secretary of State

DOCUMENT # 712171 1. Entity Name PALM SPRINGS BAPTIST CHURCH, INC.	
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Principal Place of Business 3300 TENTH AVENUE NORTH PALM SPRINGS, FL 33461	Mailing Address 3300 TENTH AVENUE NORTH PALM SPRINGS, FL 33461
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DO NOT WRITE IN THIS SPACE



01072008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-1101710	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent HALL, LYNN 3300 TENTH AVENUE NORTH PALM SPRINGS, FL 33461

**DO NOT WRITE
IN THIS SPACE**

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, 2008	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	000000879780 04/15/08-80024-007 61.25
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDT WETHERILL, ART 337 EAST LAKE RD. PALM SPRINGS, FL 33461
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDT HAYES, JERREL 124 E. BROWNING DR. WEST PALM BEACH, FL 33406
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SDT EWEN, ASTLEY P. O. BOX 21451 WEST PALM BEACH, FL 33416
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TDT EVANS, WILLIAM A 213 RUSSELL RD PALM SPRINGS, FL 33461
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: William A. Evans **William A. Evans**
TREASURER **Treasurer** 4/1/08 5619658970
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #