

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714529

FILED
Jan 16, 2007
Secretary of State

Entity Name: SOUTH VENICE BAPTIST CHURCH, INC.

Current Principal Place of Business:

3167 ENGLEWOOD RD
VENICE, FL 34293

New Principal Place of Business:

Current Mailing Address:

3167 ENGLEWOOD RD
VENICE, FL 34293

New Mailing Address:

FEI Number: 59-1142534

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, ROBERT
409 KUNZE RD
VENICE, FL 34292 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TR () Delete
Name: CHESBROUGH, AL MR.
Address: 344 BARD ROAD
City-St-Zip: VENICE, FL 34293

Title: TR () Delete
Name: LIVERMORE, NORMAN MR.
Address: 615 ALBEE FARM RD.
City-St-Zip: NOKOMIS, FL 34275

Title: TR () Delete
Name: ENGEL, JILL MRS
Address: 322 OTTER CREEK DRIVE
City-St-Zip: VENICE, FL 34292

Title: TR () Delete
Name: JOHNSON, MICHAEL MR
Address: 1704 FOUNTAIN VIEW CIRCLE
City-St-Zip: VENICE, FL 34292

Title: TR () Delete
Name: PIPPEN, MAUREEN MRS.
Address: 3564 SHAMROCK DR.
City-St-Zip: VENICE, FL 34293

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TR (X) Change () Addition
Name: MERZ, CHARLES MR.
Address: 420 BIMINI AVE.
City-St-Zip: VENICE, FL 34285

Title: TR (X) Change () Addition
Name: DURDEN, CARL MR.
Address: P. O. BOX 157
City-St-Zip: NOKOMIS, FL 34274

Title: TR (X) Change () Addition
Name: MOORE, ROBERT MR
Address: 409 KUNZE ROAD
City-St-Zip: VENICE, FL 34292

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TR (X) Change () Addition
Name: PIPPIN, MAUREEN MRS.
Address: 3564 SHAMROCK DR.
City-St-Zip: VENICE, FL 34293

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHAEL JOHNSON

TR

01/16/2007

Electronic Signature of Signing Officer or Director

Date