## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#719642**

FILED Apr 21, 2008 Secretary of State

Entity Name: TREASURE COAST BAPTIST ASSOCIATION INC.

Current Principal Place of Business:		New Principal	New Principal Place of Business:	
5700 GRA FORT PIE	.HAM RD RCE, FL 34947	74307 US		
Current Mailing Address:		New Mailing Address:		
700 GRA ORT PIE	.HAM RD RCE, FL 34947	74307 US		
El Number	: 59-1412608	FEI Number Applied For ( )	FEI Number Not Applicab	e ( ) Certificate of Status Desired ( )
Name and	l Address of C	urrent Registered Agent:	Name and Ad	dress of New Registered Agent:
137 MÉLT	ARVEY J DR ON AVE AN, FL 32958	US		
		ubmits this statement for the	purpose of changing its re	gistered office or registered agent, or both
n the State	e of Florida.	ubmits this statement for the	purpose of changing its re	gistered office or registered agent, or both
n the State	e of Florida. RE:			egistered office or registered agent, or both
n the State	e of Florida. RE:	ic Signature of Registered Ag	ent	
n the State BIGNATUI  DFFICER: itle: lame: kddress:	e of Florida.  RE: Electroni  S AND DIRECT	ic Signature of Registered Ag F <b>ORS:</b> Delete E IOD WAY	ent	Date
n the State	e of Florida.  RE:  Electroni  S AND DIRECT  T ()  GOSNEY, MARI 458 BRIDLEWO FORT PIERCE,	ic Signature of Registered Ag  FORS:  Delete E  FOD WAY FL 34945  Delete K,	ent  ADDITIONS/C  Title:  Name:  Address:	Date HANGES TO OFFICERS AND DIRECTO
n the State BIGNATUI  DFFICER  Title: lame: lame: lame: lame: lame: lame: lame:	e of Florida.  RE:  Electroni  S AND DIRECT  T ()  GOSNEY, MARI 458 BRIDLEWC FORT PIERCE,  D ()  LOPES, JANET 110 HIALEAH AV FT. PIERCE, FL	ic Signature of Registered Ag  FORS:  Delete E FOD WAY FL 34945  Delete K, /E 34982  Delete / J	ent  ADDITIONS/C  Title: Name: Address: City-St-Zip:  Title: Name: Address:	Date  HANGES TO OFFICERS AND DIRECTO  ( ) 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: HARVEY J. WEBB P 04/21/2008