


**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 19, 2005 08:00 AM
Secretary of State

DOCUMENT # 719747 1. Entity Name GUNN HIGHWAY BAPTIST CHURCH, INC.	
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Principal Place of Business <input type="checkbox"/> 28315 BAYHEAD RD DADE CITY, FL 33523 US	Mailing Address 18108 WOOD CREEK PL LUTZ, FL 33548 US
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DO NOT WRITE IN THIS SPACE



04142005 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-1375197	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent CROSS, JANICE H 18108 WOODCREEK PL LUTZ, FL 33548	DO NOT WRITE IN THIS SPACE
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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000315135 04/19/05-80024-008 61.25
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SHARPLESS, ROY A JR 11707 COUNTRY CLUB PL TAMPA, FL 336124102
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BARTON, OTIS 925 PINEHILL BLVD. GENEVA, FL 32732
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CROSS, JANICE H 18108 WOODCREEK PL LUTZ, FL 33548
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DORIFF, JEANETTE H 654 CARRIGAN WOODS TRAIL OVIEDO, FL 32765
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 exemption stated in Section 119.07(3)(i), 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: Janice H. Cross, Secretary Janice H. Cross April 14, 2005
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

813-610-6793