2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 721541

FILED Oct 06, 2005 Secretary of State

Entity Name: FIRST BAPTIST CHURCH OF ALTOONA, FLORIDA, INC.

Current F	Principal Place of Business:	New Principal Place of Business:
42226 SR P.O. BOX ALTOON		
Current Mailing Address:		New Mailing Address:
42226 SR P.O. BOX ALTOON		
In accordar	nce with s. 607.193(2)(b), F.S., the corporation did not receive	•
Name and	d Address of Current Registered Agent:	Name and Address of New Registered Agent:
	KEN 2 42/ PO BOX 1298 A, FL 32702 US	KELLEY, KEN DR. 18712 CR 42/ PO BOX 1298 ALTOONA, FL 32702 US
	e named entity submits this statement for the purpose te of Florida.	e of changing its registered office or registered agent, or botl
SIGNATU	RE: DR. KEN KELLEY	10/06/2005
	Electronic Signature of Registered Agent	Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTO
Title: Name: Address: City-St-Zip:	M () Delete KELLEY, KEN DR 18712 CR 42/PO BOX 1298 ALTOONA, FL 32702	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	T () Delete COLLIER, EDWARD 42337 BIG OAK ROAD ALTOONA, FL 32702	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D () Delete HUDSON, ALAN 42540 BIG OAK RD ALTOONA, FL 32702	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	T () Delete HOSKINS, LYNN 535 W OCALA ST UMATILLA, FL 32784	Title: () Change () Addition Name: Address: City-St-Zip:
Title:	T () Delete HOSIER, JOYCE	Title: () Change () Addition Name: Address:
Name: Address: City-St-Zip:	71 OUTLOOK ST. UMATILLA, FL 32784	City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KEN KELLEY DR 10/06/2005