2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721541

FILED Jun 11, 2007 Secretary of State

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

Current Principal Place of Business:		New Principal Place of Business:	
42226 SR P.O. BOX S ALTOONA		42226 SR ALTOONA	19 , FL 32702
Current Mailing Address:		New Mailing Address:	
42226 SR P.O. BOX S ALTOONA		PO BOX 9 ALTOONA	7 , FL 32702
In accordanc	ce with s. 607.193(2)(b), F.S., the corporation did not receive	-	e.
Name and	Address of Current Registered Agent:	Name and	Address of New Registered Agent:
	EN DR. 42/ PO BOX 1298 , FL 32702 US	KELLEY, K 18712 CR ALTOONA	
	named entity submits this statement for the purpose of Florida.	of changing i	ts registered office or registered agent, or both,
SIGNATUF	RE: DR. KEN KELLEY		06/11/2007
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITION	IS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	M () Delete KELLEY, KEN DR 18712 CR 42/PO BOX 1298 ALTOONA, FL 32702	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	T () Delete PAUL, HASLETT 45626 STATE ROAD 19 ALTOONA, FL 32702	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Delete GARRY, HIRSCH 66 ROSE STREET UMATILLA, FL 32784	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	T () Delete HOSKINS, LYNN 535 W OCALA ST UMATILLA, FL 32784	Title: Name: Address: City-St-Zip:	D (X) Change () Addition ROBERT, MACKEY 52031 SR 19 ALTOONA, FL 32702
Title: Name: Address: City-St-Zip:	T () Delete HOSIER, JOYCE 71 OUTLOOK ST. UMATILLA, FL 32784	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	T () Delete ALAN, HUDSON 42540 BIG OAK ROAD ALTOONA, FL 32702	Title: Name: Address: City-St-Zip:	() 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: DR. KEN KELLEY M 06/11/2007