

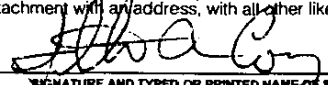


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 07, 2008 8:00 am**  
**Secretary of State**

04-07-2008 90059 002 \*\*\*\*61.25

<b>DOCUMENT # 722683</b> 1. Entity Name <b>WINKLER ROAD BAPTIST CHURCH, INC.</b>					
Principal Place of Business <b>5770 WINKLER ROAD FT MYERS, FL 33919</b>				Mailing Address <b>5770 WINKLER ROAD FT MYERS, FL 33919</b>	
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>59-1817886</b>	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>HUNTE, DAVID F. 307 SOUTH ROAD FT. MYERS, FL 33907</b>				7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b></span> Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>Make check payable to Florida Department of State</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T COREY, ARTHUR 8341 BEACON BLVD. FT. MYERS, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HENDERSON, RANDALL 4445 CROSSJACK CT. B-2 FORT MYERS, FL 33919	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STOUDT, WILLIAM 1515 SW 40TH TERRACE CAPE CORAL, FL 33914	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUNTE, JOHN 6701 BABCOCK ST. FORT MYERS, FL 33966	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DOERSTLING, AXEL 9131 SOUTHMONT COVE #306 FORT MYERS, FL 33908	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BATES, RAY 5426 ASHTON CIRCLE FORT MYERS, FL 33907	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CALGER, DAVID 302 SOUTH ROAD FORT MYERS, FL 33907	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ETHERIDGE, SCOTT 623 CORAL DRIVE CAPE CORAL, FL 33904	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CRUMP, BEN 4709 JUNONIA CT FORT MYERS, FL 33908	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HOULIHAN, JAMES 18205 DUPONT DR. FORT MYERS, FL 33967	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NUNERY, RICHARD 1499 BRANDYWINE CIRCLE FORT MYERS, FL 33919	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LOUGHNER, LARRY 17040 EAST LAKE DR. N. FORT MYERS, FL 33917	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.					
<b>SIGNATURE:</b>  <b>ARTHUR COREY</b> <span style="float: right;">4/2/08 239-482-7702</span>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR <span style="float: right;">Date Daytime Phone #</span>					

OFFICERS CONTINUED — ATTACHMENT  
— 40061599  
#722683

T  
MACENAS, NICK (ADDITION)  
16273 CHARLESTON AVE.  
FORT MYERS, FL 33908

T  
SODREL, TERRY (ADDITION)  
11250 CARAVEL CIRCLE #204  
FORT MYERS, FL 33908

T  
TAPIA, OSCAR (ADDITION)  
4652 LITTLE RIVER LANE  
FORT MYERS, FL 33905