2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723131

FILED Apr 07, 2008 Secretary of State

Entity Name: PASADENA BAPTIST CHURCH OF DADE CITY INCORPORATED

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	NTON AVE. Y, FL 3352584	37			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
35845 CLINTON AVE. DADE CITY, FL 335258437					
El Number:	59-1389057	FEI Number Applied For()	FEI Number Not Applicable()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
	i, JAME NTON AVE. Y, FL 33525	US			
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.					
SIGNATUF					
	Electron	ic Signature of Registered Agent		Date	
OFFICERS	S AND DIREC	rors:	ADDITIONS/CHANG	GES TO OFFICERS AND DIRECTORS:	
Fitle: Name: Address: City-St-Zip:	D () HUNT, BOBBY 9032 JANMAR F DADE CITY, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Nddress: Dity-St-Zip:	D () HUFFSTUTLER, 14936 DOUGLA DADE CITY, FL	S ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip:	D () BROCK, GLENN 14919 DOUGLA DADE CITY, FL	S ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip:	T () SANDERSON, C 11301 OLD LAK DADE CITY, FL	ELAND HWY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip:	VD () MEEKS, MARVI 38810 SPARKV DADE CITY, FL	AN ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: Dity-St-Zip:	T () REED, HOMER 12372 CARL LO DADE CITY, FL	OOP	Title: Name: Address: City-St-Zip:	() Change () Addition	
h - m - h		armatian aupplied with this filing		untion atota d in Obsertan 440	

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: BOBBY HUNT D 04/07/2008