

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724027

FILED
Jan 07, 2008
Secretary of State

Entity Name: FIRST BAPTIST INSTITUTIONAL CHURCH, INC.

Current Principal Place of Business:

932 MARTIN LUTHER KING JR. AVENUE
LAKELAND, FL 33805 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 1186
LAKELAND, FL 33805 US

New Mailing Address:

FEI Number: 59-1359754

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REV. ALEX HARPER, SR. PASTOR
1521 PROVIDENCE RD.
LAKELAND, FL 33805 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: FIELDS, ROBERT
Address: 1436 N. WEBSTER AVE.
City-St-Zip: LAKELAND, FL 33805

Title: D () Delete
Name: ALEX HARPER, SR. PASTOR
Address: 1521 PROVIDENCE RD.
City-St-Zip: LAKELAND, FL 33805

Title: T () Delete
Name: HAWK, MILDRED
Address: 932 W. 13TH STREET
City-St-Zip: LAKELAND, FL 33805

Title: D () Delete
Name: CAMPBELL, REUBEN
Address: 1332 N. THOMPSON AVE.
City-St-Zip: LAKELAND, FL 33805

Title: D () Delete
Name: JOHNSON, JAMES
Address: 1716 BUSH AVE.
City-St-Zip: LAKELAND, FL 33805

Title: T () Delete
Name: FIELDS, GOW B
Address: 229 NORTH FLORIDA AVENUE
City-St-Zip: LAKELAND, FL 33801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BEVERLY HENDERSON

SECT

01/07/2008

Electronic Signature of Signing Officer or Director

Date