2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#724370

FILED Apr 19, 2007 Secretary of State

Entity Name: FIRST BAPTIST CHURCH OF FLORAL CITY, INC.

Current Principal Place of Business: New Principal Place of Business:

8545 EAST MAGNOLIA ST. PO BOX 114

FLORAL CITY, FL 32636 FLORAL CITY, FL 32636

New Mailing Address: Current Mailing Address:

8545 EAST MAGNOLIA ST. PO BOX 114 FLORAL CITY, FL 32636

FEI Number: 59-1757718 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

8545 EAST MAGNOLIA ST.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

THOMPSON, ROY M REV. 8960 E JEFFERSON ST

HANNIE, STEVEN G 9480 EAST TSALA APOPKA DRIVE US FLORAL CITY, FL 34436 FLORAL CITY, FL 34436

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: STEVEN G. HANNIE 04/19/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition HIBBARD, RICHARD JR. PENCE, CHERYL Name: Name: 9016 S. WATERVIEW DR. Address: 10777 S. PLEASANT GROVE ROAD Address:

City-St-Zip: FLORAL CITY, FL 34436 City-St-Zip: INVERNESS, FL 34452

Title: () Delete Title: (X) Change () Addition

WAYBRIGHT, MERRY Name: CAREY, MICHELLE Name: Address: 12963 S. BETTY POINT Address: 3020 EAST VERNON COURT City-St-Zip: FLORAL CITY, FL 34436 City-St-Zip: FLORAL CITY, FL 34436

Title: () Delete Title: () Change () Addition

HIBBARD, PHILLIP Name: Name: Address: PO BOX 872 Address: City-St-Zip: FLORAL CITY, FL 34436 City-St-Zip:

() Delete (X) Change () Addition Title: Title: WAYBRIGHT, JIMMY Name: Name: WHITE, WALTER

Address: 12963 S. BETTY POINT Address: 4809 EAST AMHERST STREET City-St-Zip: FLORAL CITY, FL 34436 City-St-Zip: HERNANDO, FL 34442

Title: () Delete Title: (X) Change () Addition

HANNIE, STEVE HANNIE, STEVEN G Name: Name: 9480 E TSALA APOPKA DR 9480 E TSALA APOPKA DR Address: Address: City-St-Zip: FLORAL CITY, FL 34436 City-St-Zip: FLORAL CITY, FL 34436

() Change (X) Addition Title: () Delete Title:

FORD, JUDY Name: Name: Address: Address: 620 EAST INVERNESS BLVD INVERNESS, FL 34452 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: STEVEN G. HANNIE Т 04/19/2007