## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 727217** 

FILED Feb 15, 2008 Secretary of State

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

**Current Principal Place of Business: New Principal Place of Business:** 12125 71ST ST E 12125 71ST ST E P O BOX 195 PARRISH, FL 34219 PARRISH, FL 34219 **New Mailing Address: Current Mailing Address:** 12125 71ST ST E P O BOX 195 PARRISH, FL 34219 FEI Number: 59-2416449 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PARRISH, SPENCER O. 7301 121ST AVE. E. PARRISH, FL 34219 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. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete PARRISH, SPENCER O. PARRISH, SPENCER O. Name: Name: 7301 121ST AVE. E. Address: 7301 121ST AVE. E. Address: PARRISH, FL 34219 City-St-Zip: PARRISH, FL City-St-Zip: Title: Title: (X) Change ( ) Addition ( ) Delete Name: MCGUIRE, JON A Name: MCGUIRE, JON A Address: 11720 ERIE RD Address: 11720 ERIE RD City-St-Zip: PARRISH, FL City-St-Zip: PARRISH, FL 34219 Title: () Delete Title: (X) Change ( ) Addition ANDERSON, GERALEEN ANDERSON, GERALEEN Name: Name: 11601 US 301 N 6112 90TH AVE. CIRCLE E. Address: Address: City-St-Zip: PARRISH, FL City-St-Zip: PARRISH, FL 34219 Title: () Delete Title: ( ) Change (X) Addition OWNBEY, WAYNE Name: Name: 4920 OXFORD RD. Address: Address: City-St-Zip: City-St-Zip: PARRISH, FL 34219 Title: () Delete Title: ( ) Change (X) Addition CRUZ, JOYCE Name: Name: 2101 6TH ST. W. Address: Address: City-St-Zip: City-St-Zip: PALMETTO, FL 34221

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: WAYNE OWNBEY T 02/15/2008