


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2007 08:00 AM
Secretary of State

DOCUMENT # 729708	
1. Entity Name FIRST BAPTIST CHURCH WOODVILLE, INCORPORATED	

Principal Place of Business 9500 WOODVILLE HIGHWAY TALLAHASSEE, FL 32311 US	Mailing Address P.O. BOX 570 WOODVILLE, FL 32362-0570 US
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01192007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2226222	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent GERRELL, DALE 10608 GERREL DR TALLAHASSEE, FL 32311

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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 <u><i>Jacki R. Lawhon</i></u> <small>Signature, typed or printed name of registered agent and title if applicable</small>	DATE <u>1/23/07</u> <small>(NOTE: Registered Agent signature required when re-registering)</small>

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CT GERRELL, DALE 10608 GERRELL DR TALLAHASSEE, FL 32311
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TC LAWHON, JACKI 2026 LARCHMONT LANE TALLAHASSEE, FL 32305
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CC LAWHON, JACKI R PO BOX 570 WOODVILLE, FL 32362
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

U00000604117
01/29/07-80041-001 61.25

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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.	
SIGNATURE: <u><i>Jacki R. Lawhon</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	DATE <u>1/23/07</u> DAYTIME PHONE # <u>421-3315</u>