


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 10, 2008 08:00 A
Secretary of State

DOCUMENT # 729708 1. Entity Name FIRST BAPTIST CHURCH WOODVILLE, INCORPORATED	
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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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01082008 No Chg-NP CR2E037 (4/06)

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

6. Name and Address of Current Registered Agent GERRELL, DALE 10608 GERREL DR TALLAHASSEE, FL 32311
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**DO NOT WRITE
IN THIS SPACE**

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 Jacki R. Lawhon
Signature, typed or printed name of registered agent and title if applicable

Jacki R. Lawhon
(NOTE: Registered Agent signature required when reappointing)

1/8/08
DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

U000000778760
01/11/08-80009-022 61.25

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	

**DO NOT WRITE
IN THIS SPACE**

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: Jacki R. Lawhon
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jacki R. Lawhon 1/8/08 (850) 421-3315
Date Daytime Phone #