

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730088

FILED  
Aug 29, 2008  
Secretary of State

**Entity Name:** SOUTH CONWAY ROAD BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

6099 SOUTH CONWAY ROAD  
ORLANDO, FL 32812

**New Principal Place of Business:**

**Current Mailing Address:**

6099 SOUTH CONWAY ROAD  
ORLANDO, FL 32812

**New Mailing Address:**

**FEI Number:** 59-1543415      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

COZAD, CAROL A  
1710 CAMPBELL AVENUE  
ORLANDO, FL 32806 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: PD ( ) Delete  
Name: JOHNSON, JIMMY  
Address: 6099 SOUTH CONWAY ROAD  
City-St-Zip: ORLANDO, FL 32812

Title: D ( ) Delete  
Name: BERG, STEVEN M  
Address: 4820 HAINES CIRCLE  
City-St-Zip: ORLANDO, FL 32822

Title: D ( ) Delete  
Name: STOCKER, EASTER  
Address: 4420 SEILS WAY  
City-St-Zip: ORLANDO, FL 32812

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: D (X) Change ( ) Addition  
Name: COZAD, CAROL A  
Address: 1710 CAMPBELL AVENUE  
City-St-Zip: ORLANDO, FL 32806

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: CAROL A. COZAD

D

08/29/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date