2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#731608

FILED Jul 22, 2005 Secretary of State

Entity Name: MARION BAPTIST ASSOCIATION, INC.

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

1131 NE 8TH AVENUE 1520 N.E. 14 STREET OCALA, FL 34470 OCALA, FL 34470

Current Mailing Address: New Mailing Address:

P O BOX 1137 POST OFFICE BOX 1137 OCALA, FL 34478 OCALA, FL 34478

FEI Number: 59-1781101 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: Name and Address of New Registered Agent:

SNELL, JAMES REV
14100 E HIGHWAY 40
SILVER SPRINGS, FL 34488 US
OCALA, FL 34482 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: REV. JOHN OUTLAW/LHL 07/22/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: MOD (X) Change () Addition Name: SNELL, JAMES REV Name: OUTLAW, JOHN REV

 Name:
 SNELL, JAIMES REV
 Name:
 OUTLAW, JOHN REV

 Address:
 14100 E HIGHWAY 40
 Address:
 5675 N.W. 110 AVENUE

 City-St-Zip:
 SILVER SPRINGS, FL 34488
 City-St-Zip:
 OCALA, FL 34482

Title: SD () Delete Title: CLK (X) Change () Addition Name: LISTEBARGER, LUANN MRS Name: LISTEBARGER, LUANN MRS.

Address: 1131 NF 8 AVENUE Address: 1520 N F 14 STREFT

 Address:
 1131 NE 8 AVENUE
 Address:
 1520 N.E. 14 STREET

 City-St-Zip:
 OCALA, FL 34470
 City-St-Zip:
 OCALA, FL 34470

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

 Name:
 OUTLAW, JOHN REV
 Name:

 Address:
 5675 NW 110 AVENUE
 Address:

 City-St-Zip:
 OCALA, FL 34482
 City-St-Zip:

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

 Name:
 RUSSELL, HAROLD
 Name:
 RUSSELL, HAROLD MR.

 Address:
 901 NE 56 ST
 Address:
 901 N.E. 56 STREET

 City-St-Zip:
 OCALA, FL 34479
 City-St-Zip:
 OCALA, FL 34479

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LUANN H. LISTEBARGER CLK 07/22/2005