


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2007 08:00 A
Secretary of State

DOCUMENT # 733277	
1. Entity Name THE BIBLE BAPTIST CHURCH, INC.	

Principal Place of Business JO-JO AND JERNIGAN ROADS P. O. BOX 6102 PENSACOLA, FL 32503	Mailing Address JO-JO AND JERNIGAN ROADS P. O. BOX 6102 PENSACOLA, FL 32503
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02012007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1622155	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CLIPPER, ROY L 7342 TEMPLETON RD PENSACOLA, FL 32506
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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 <u><i>Roy L Clipper</i></u> R.L. CLIPPER	DATE <u>2-2-07</u>
<small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when restate.)</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	PD RUCKMAN, PETER 8808 CHILSOLM PENSACOLA, FL 32514
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MITCHELL, ROBERT 1169 JO JO ROAD PENSACOLA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PIA, GERALD 250 SHAYTRAIL CANTONMENT, FL 32533
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RUCKER, CARTER 984 HIGHWAY 297 A CANTONMENT, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DONAVON, BRIAN 9687 PICKWOOD DRIVE PENSACOLA, FL 32514
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST CLIPPER, ROY L 7342 TEMPLETON ROAD PENSACOLA, FL 32506

U00000630413
02/20/07-80006-013 70.00

**DO NOT WRITE
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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>R.L. Clipper</i></u> R.L. CLIPPER	Date <u>2/2/07</u>	Daytime Phone # <u>850 477 8812</u>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		