2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#736370

FILED Apr 10, 2007 Secretary of State

Entity Name: THE SHENANDOAH BAPTIST CHURCH, INCORPORATED

Current Principal Place of Business: New Principal Place of Business: 7308 PERSHING AVE E ORLANDO, FL 32822 **Current Mailing Address: New Mailing Address:** 7308 PERSHING AVE E ORLANDO, FL 32822 FEI Number: 59-2319203 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NORRIS, KEITH 7332 E PERSHING AVENUE ORLANDO, FL 32822 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition NORRIS, KEITH Name: Name: 7332 E PERSHING AVENUE Address: Address: City-St-Zip: ORLANDO, FL 32822 City-St-Zip: Title: () Delete Title: () Change () Addition Name: PEYNADO, ASTON Name: Address: 4225 GULFSTREAM BAY CT. Address: City-St-Zip: ORLANDO, FL 32822 City-St-Zip: Title: () Delete Title: () Change () Addition CORNELL, RHONDA Name: Name: 4722 STURBRIDGE CIR. Address: Address: City-St-Zip: ORLANDO, FL 32812 City-St-Zip: () Delete Title: Title: () Change () Addition ROGALINSKI, KATHY Name: Name: 3601 OGLETREE CT Address: Address: City-St-Zip: ORLANDO, FL 32812 City-St-Zip: Title: () Delete Title: () Change () Addition POPE, JAMES W Name: Name: 5900 LYLE ST. Address: Address: City-St-Zip: ORLANDO, FL 32807 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: RHONDA CORNELL T 04/10/2007