

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736994

FILED  
May 12, 2008  
Secretary of State

Entity Name: PINEY GROVE PRIMITIVE BAPTIST CHURCH OF CHRIST, INC.

**Current Principal Place of Business:**

3100 N. 31ST STREET & AVE. S  
FORT PIERCE, FL 34947

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 3601  
FT. PIERCE, FL 34948

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) 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:**

SESSIONS, REGINALD B  
320 AVENUE A  
FT. PIERCE, FL 34950 US

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

WALKER, FARRIS  
108 DEVONSHIRE DR.  
FT. PIERCE, FL 34946 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: FARRIS WALKER

05/12/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D (X) Delete  
Name: ANDERSON, BOBBY REV.  
Address: 111 ACADEMY DRIVE  
City-St-Zip: FT. PIERCE, FL 34946

Title: D ( ) Delete  
Name: DIXON, MARK  
Address: 1215 AVENUE G  
City-St-Zip: FT. PIERCE, FL 34946

Title: D ( ) Delete  
Name: MOORER, CONNER  
Address: 2210 N. 23RD STREET  
City-St-Zip: FT. PIERCE, FL 34946

Title: D ( ) Delete  
Name: GANDY, EDWARD  
Address: 1406 N. 35TH STREET  
City-St-Zip: FT. PIERCE, FL 34947

Title: D (X) Delete  
Name: JONES, MACK  
Address: 4655 36TH AVENUE  
City-St-Zip: VERO BEACH, FL 32967

Title: D ( ) Delete  
Name: WALKER, FARRIS  
Address: 108 DEVONSHIRE DR.  
City-St-Zip: FT. PIERCE, FL 34946

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

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

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

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

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

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

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: FARRIS WALKER

MR.

05/12/2008

Electronic Signature of Signing Officer or Director

Date