2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#737579

FILED Sep 03, 2005 Secretary of State

Entity Name: BIBLE BAPTIST CHURCH OF SHADY HILLS. INC.

Current F	Principal Place of Business:	New Principal Place of Business:
OBOX	TLE RANCH ROAD 11061 HILL, FL 34610	
Current N	Mailing Address:	New Mailing Address:
P.O. BOX SPRING H	.11061 HILL, FL 34610	
	r: 59-1700657 FEI Number Applied For (nce with s. 607.193(2)(b), F.S., the corporation	
Name and	d Address of Current Registered Age	nt: Name and Address of New Registered Agent:
10432 CL	AFF, ANDREW ARION ST. HILL, FL 34608 US	
	e named entity submits this statement fo e of Florida.	r the purpose of changing its registered office or registered agent, or bo
n the Stat	re of Florida.	r the purpose of changing its registered office or registered agent, or bo
n the Stat	re of Florida.	
n the Stat SIGNATU	e of Florida. ** RE:	
n the Stat SIGNATU DFFICER ittle: lame: ddress:	re of Florida. RE: Electronic Signature of Registere	ed Agent Date
n the Stat	te of Florida. RE: Electronic Signature of Registere S AND DIRECTORS: D () Delete JOHNSON, ROBLEY N 4590 CRESCENT	ed Agent Date ADDITIONS/CHANGES TO OFFICERS AND DIRECT Title: () Change () Addition Name: Address:
on the State SIGNATU DFFICER itle: lame: ddress: itle: lame: ddress:	The of Florida. RE: Electronic Signature of Registere ES AND DIRECTORS: D () Delete JOHNSON, ROBLEY N 4590 CRESCENT SPRING HILL, FL D () Delete HARDEMON, LESTER 16926 AKINS DR	ADDITIONS/CHANGES TO OFFICERS AND DIRECT Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:

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: CLARINDA MORRISON T 09/03/2005