2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 21, 2008 8:00 am
Secretary of State
04-21-2008 90044 008 ****61.25

DOCUMENT # 739557

1. Entity Name

GALILEAN BAPTIST CHURCH, INC.

Principal Place of Business	Mailing Address
6008 JOHN PITTS RD PANAMA CITY FL 32404	6008 JOHN PITTS RD PANAMA CITY FL 32404 US

1st MOORE CR2E037 (10/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2389199 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GIBBENS, GARY PASTOR 5706 MAUDE ROAD PANAMA CITY FL 32404	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW. FEE IS $61.25
Due By May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P GIBBENS, GARY 5706 MAUDE RD. PANAMA CITY, FL 32404	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V PITTS, HORACE 5137 SUNWOOD DR. PANAMA CITY FL 32404	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LEBOEUF, KEVIN 6020 JOHN PITTS RD. PANAMA CITY FL 32404	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/T LEBOEUF, SHERRY 6020 JOHN PITTS RD. PANAMA CITY FL 32404	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary /Treasurer Diane Reid 7331 Copenhagen Panama City FL 32404	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary / Treasurer Belinda Grainger 8366 AnGie Circle Panama City FL 32404	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Belinda Grainger Belinda Grainger 5-18-08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #