

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 31, 2008 08:00 AM
Secretary of State

DOCUMENT # 749100

1. Entity Name
FIRST BAPTIST CHURCH OF HOBE SOUND, INC.



Principal Place of Business
**8515 S E CHURCH ST
HOBESOUND, FL 33455**

Mailing Address
**8515 S E CHURCH ST
HOBESOUND, FL 33455**



03252008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2117406

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**PHILLIPS, CHARLES PASTOR
8515 SE CHURCH ST
HOBE SOUND, FL 33455**

**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

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

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME PHILLIPS, CHARLES
STREET ADDRESS 8515 SE CHURCH ST
CITY-ST-ZIP HOBE SOUND, FL 33455

TITLE E-T
NAME WHITACRE, DON
STREET ADDRESS 9726 167TH PLACE NORTH
CITY-ST-ZIP JUPITER, FL 33478

TITLE DT
NAME CANCIO, JERRY
STREET ADDRESS 11120 SE GOMEZ AVE
CITY-ST-ZIP HOBE SOUND, FL 33455

TITLE
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STREET ADDRESS
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CITY-ST-ZIP

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IN THIS SPACE**

U00000876234
04/11/08-80066-012 61.25

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: *Charles Phillips*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/08 7725465000
Date Daytime Phone #