2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2008 08:00 A
Secretary of State

DOCUMENT # 750142 1. Entity Name WAUSAU FIRST BAPTIST CHURCH, INC.			<i>∞</i> •		Secrét	tary of Sta
Principal Place of Business 3493 WASHINGTON STREET WAUSAU, FL 32463 US	P.O. BOX 583 WAUSAU, FL 32463 US			II SIHI sha i ibh siili ili		H NI
DO NOT WRITE	IN THIS SDA	CE	1 (2011) (201	No Chg-NP	#1#(#154 S154 C	i7 (4/06)
DO NOT WRITE	IN THIS SPA	UE	4. FEI Numb 59-338			Applied For Not Applicable 8.75 Additional
		7 vert			Fe	e Required
6. Name and Address of Current Registered Agent MILLER, RICKY 3493 WASHINGTON STREET WAUSAU, FL 32463			IN	NOT W	PACE	
The above named entity submits this statement for the purpose of changing its registered office or registered at the obligations of registered agent. StGNATURE Softure, yood or proted name of registered agent and bit of applicable. (NOTE: Regulated Agent signature required when					crida. Fam far L - 08	
Filling Fee Is \$61.25 Due by May 1, 2008	Election Campaign Fina Trust Fund Contribution.		.00 May Be led to Fees	U0000 04/10/08	0871686 -80008-	018 61.25
10. OFFICERS AND D TITLE T NAME MILLER, BRIDGETT STREET ADDRESS 3493 WASHINGTON STREET CITY-ST-ZIP WAUSAU, FL 32463	IRECTORS					
TITLE C NAME NICHOLS, JOEY STREET ADDRESS 3493 WASHINGTON STREET WAUSAU, FL 32463						

DO NOT WRITE IN THIS SPACE

12. Thereby 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:

NAME

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TOPED OR PRINTED NAME OF MUNING OFFICER OR DIRECTO

3-16-08 (850) 38-7898