## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT #752132**

1. Entity Name

MYRTLE REGULAR BAPTIST CHURCH, INC.



**FILED** Jan 09, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

2660 BRANDYWINE LANE MELBOURNE, FL 32904

3553 DIAMOND TER MULBERRY, FL 33860



DO NOT WRITE IN THIS SPACE

01072008 No Chg-NP CR2E037 (4/06)

4. FEI Number NOT APPLICABLE Applied For Not Applicable \$8.75 Additional 

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

COX, AUTTIS J 3553 DIAMOND TERRACE MULBERRY, FL 33860

SIGNATURE:

## 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 the if applicable. (NOTE: Registered Agent signature required when rematating)  DATE					
	Filling Fee is \$61.25 Due by May 1, 2008	Selection Campaign Finant Trust Fund Contribution.		\$5.00 May Be Added to Fees	DATE
10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	OFFICERS AND DIR PD BARNEY, JAMES 5705 DIXIE AVE LAKELAND, FL 33801	ECTORS			U00000776430 01/09/08-80024-002 61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JARRELL, CHARLES P O BOX 325 SPARR, FL 32192				
NAME STREET ADDRESS CITY-ST-ZIP	SD COX, AUTTIS J 3553 DIAMOND TER MULBERRY, FL 33860			DO	NOT WRITE
TITLE NAME STREET ADDRESS C!TY-ST-ZIP				IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			e e e e e e e e e e e e e e e e e e e		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	71				
12. I hereby certify that the information supplied with this filling 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 suppowered.					