2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Aug 30, 2007 8:00 am Secretary of State **DOCUMENT # 762831** 1. Entity Name 08-30-2007 90001 010 ****61.25 PEACE RIVER BAPTIST CHURCH, INC. Principal Place of Business Mailing Address 478 BERRY ST. 478 BERRY ST. PUNTA GORDA FL 33950-2426 **PUNTA GORDA FL 33950-2426** 2. Principal Place of Business - No PO Box # Mailing Address Suite, Apt. #, etc. Suite, Apr. #, etc. 2nd MOORE CR2E037 (4/07) City & State City & State Applied For 4. FEI Number 59-2209107 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HUGHES, REV THOMAS E Street Address (P.O. Box Number is Not Acceptable) **3481 ROME ST** PUNTA GORDA FL 33980 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 (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By September 5, 2007 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE TITLE Delete Change Addition HUGHES, THOMAS E NAME 3981 ROME ST STREET ADDRESS STREET ADDRESS PUNTA GORDA FL 33950 CITY-ST-ZIP CITY-ST-ZIP THLE ☐ Delete TITLE Change Addition AGABEDIS, HARRY NAME NAME 607 MADRID BOULVARD STREET ADDRESS STREET ADDRESS CITY - ST-ZIP PUNTA GORDA FL 33950 CITY ST NO HILLE Delete TITLE Change ■ Addition BEAVER, EDWARD NAME NAME STREET ADDRESS 24412 BUCKINGHAM WAY STREET ADDRESS PORT CHARLOTTE FL 33980 CITY-ST-ZIP CITY-ST-ZIP TITLE ✓ Delete Channe ★ Addition ROBERT GARMAN BAUMAN, RICHARD NAME NAME 27110 JONES LOOP RD. # 250 2622 KEATHERSBOND DR. STREET ADDRESS STREET ADDRESS PLINTA GORDA EL 22955 PUNTA GORDA FL CITY-ST-7IP CITY-ST-ZIP DHE ☐ Delete HILE Change Addition LATIN, MIRIAM NAME NAME 64 SABAL DRIVE STREET ADDRESS STREET ADDRESS PUNTA GORDA FL 33950 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition PARSONS, ROY NAME STREET ADDRESS 1010 FLEETWOOD DRIVE STREET ADDRESS PORT CHARLOTTE FL 33948 CITY-ST-ZIP

FILED

SIGNATURE: Miniam Satur TREASURER 9.22.07 941-637-6768

changed, or on an attachment with an address, with all other like empowered.

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