

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2008 08:00 AM
Secretary of State

DOCUMENT # 765448

1. Entity Name
FIRST BAPTIST CHURCH OF GARDEN CITY, INC.



Principal Place of Business
**3140 HASKELL-LANGLEY ROAD
 CRESTVIEW, FL 32539-9142**

Mailing Address
**3140 HASKELL-LANGLEY ROAD
 CRESTVIEW, FL 32539 US**

DO NOT WRITE IN THIS SPACE



03182008 No Chg-NP CR2E037 (4/06)

4. FEI Number
59-2382505

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**JENKINS, CHARLES J
 6169 GARDEN CITY ROAD
 CRESTVIEW, FL 32539**

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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)

Signature, typed or printed name of registered agent and title if applicable 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**

U000000869507
 04/09/08-80052-007 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR JENKINS, CHARLES J 6169 GARDEN CITY ROAD CRESTVIEW, FL 32539
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR BAGGETT, RALPH E 3179 BAGGETT LANE CRESTVIEW, FL 32539
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR PITTS, WILLIAM E 3990 BAMBI CRESTVIEW, FL 32539
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 J. Jenkins *[Signature]* 3/19/08 689-7804
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #