

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765920

FILED
Jan 22, 2007
Secretary of State

Entity Name: CENTRAL BAPTIST CHURCH, INC.

Current Principal Place of Business:

1104 BALBOA AVE
PANAMA CITY, FL 32401

New Principal Place of Business:

Current Mailing Address:

1104 BALBOA AVE
PANAMA CITY, FL 32401

New Mailing Address:

FEI Number: 59-0951457 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OVERSTREET, DEBORAH M.
303 MAGNOLIA AVENUE
PANAMA CITY, FL US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: STARLING, FRANK
Address: 2429 FLOWERS
City-St-Zip: PANAMA CITY, FL 32405

Title: VPD () Delete
Name: JACKSON, DAN
Address: P.O. BOX 9508
City-St-Zip: PANAMA CITY BEACH, FL 32417

Title: SD () Delete
Name: LARSON, VALERIE
Address: 8729 KIWI LANE
City-St-Zip: YOUNGSTOWN, FL 32466

Title: TD () Delete
Name: GIAMBRA, CHUCK
Address: 2141 W. 28TH COURT
City-St-Zip: PANAMA CITY, FL 32405

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BARTON, JOHN B
Address: 1701 MARYLAND AVE.
City-St-Zip: LYNN HAVEN, FL 32444

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN B. BARTON

PD

01/22/2007

Electronic Signature of Signing Officer or Director

_____ Date