## 2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## Apr 12, 2007 8:00 am Secretary of State **DOCUMENT #768852** 04-12-2007 90044 050 \*\*\*\*61.25 1. Entity Name CENTRAL BAPTIST INSTITUTIONAL CHURCH, INC. Principal Place of Business Mailing Address 40058614 CHURCH, INC. CHURCH, INC. **524 WEST THIRD STREET** 524 WEST THIRD STREET JACKSONVILLE, FL 32209 JACKSONVILLE, FL 32209 2. Principal Place of Business - No P.O. Box # 3. Mailing Address P.O. BOX Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03222007 Chg-NP CR2E037 (12/06) City & State City & State 4. FEI Number NOT APPLICABLE Applied For acksor Not Applicable Zip Country Countr \$8.75 Additional 5. Certificate of Status Desired Initer Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent torc WILLIAMS, TONY Box Number is Not Acceptable) 8942 IVEY ROAD JACKSONVILLE, FL 32216 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. with, and accept the obligations of registered SIGNATURE Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2007 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE Delete TITLE henneth W. Brockington TIMMONS, EHUE NAME NAME 2401 St. Leger Jacksonville STREET ADDRESS 2720 KING COLE DR STREET ADDRESS JACKSONVILLE, FL 32209 CITY ST-7IP CITY-ST-7IP M Delete Change TITLE TITLE Brenda Maddrick 1085 W. 30th Street Lacksonvillt, Florida WILLIAMS, TONY 8942 IVEY ROAD STREET ADDRESS STREET ADORESS CITY-ST-ZIP JACKSONVILLE, FL 32216 CITY-ST-ZIP 32209 Delete TITLE Change Addition ShirleyAwoodside 4412 Will Scarlet Rd. Lacksonville, Florida **BURNS. TONIA** NAME NAME 3875 SAN PABLO ROAD STREET ADDRESS STREET ADDRESS JACKSONVILLE, FL 32224 CITY-ST-71P CITY-ST-ZIP 31708 Delete TITL F ☐ Change Addition TITLE Cathy Alston 9250 Dale View Ln W. CRUTCHFIELD, FRED NAME NAME 1144 W 30TH ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32209 CITY-ST-ZIP Jackson ville, Florido TITI F ☐ Delete TITI F Mary L. Whipple 9168 9th Ave WHIPPLE, MARY L NAME NAME STREET ADDRESS 9168 9TH AVE STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32208 CITY-ST-7IP Jacksonville .Florida 32208 Delete MLE MLE ☐ Change ☑ Addition Leonard Shuman Jr. DAY JAMES NAME NAME STREET ADDRESS 9362 Arbor Gilen LO STREET ADDRESS 2153 BROADWAY AVE Jacksonville, CITY-ST-ZIP JACKSONVILLE, FL 32219 CITY-ST-ZIP Florida 32208 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 in the information 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 in the information of the exemptions contained in Chapter 119, Florida Statutes. 904) 655-123 atr SIGNATURE FICER OR DIRECTOR

FILED

#D768862 Addition

Name:

Title:

Rosemary Young-Johnson

Street Address:

634 East First St

City-State-Zip:

Jacksonville - Florida - 32206