


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

FILED
Jul 25, 2007 08:00 AM
Secretary of State

DOCUMENT # 770049 1. Entity Name FIRST BAPTIST CHURCH OF PARKER, INC.	
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Principal Place of Business 4630 E. HWY 98 P. O. BOX 10301 PARKER, FL 32404	Mailing Address 4630 E. HWY 98 P. O. BOX 10301 PARKER, FL 32404
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07122007 No Chg-NP

CR2E037 (4/08)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-6020347	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BRIGHT, FRANK 4825 MEADOW ST PARKER, FL 32404	DO NOT WRITE IN THIS SPACE
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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) DATE

Filing Fee is \$61.25
Due by September 14, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

000000770422
07/25/07-80003-004 70.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ECKER, ROBERT M 1012 W. PARK PANAMA CITY, FL 32404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHORES, JAMES D. 648 N. 9TH PLAZA PARKER, FL 32404,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS GOREY, WILLIAM N. 42 WOOD AVE PARKER, FL 32404,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV WOOD, FRED 108 N ROWE AVE PANAMA CTY, FL 32401,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SUGGS, CHESTER M 4808 4TH STREET PANAMA CITY, FL 32404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-16-07
850-871-4078 Daytime Phone #