2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 8:00 am
Secretary of State
04-16-2007 90067 032 ****61.25

DOCUMENT # 848201

1. Entity Name
GULF STATES CONFERENCE ASSOCIATION OF SEVENTH-DAY ADVENTISTS, INCORPORATED

Principal Place of Business	Mailing Address
6450 ATLANTA HIGHWAY P.O. BOX 240249 MONTGOMERY, AL 36124-0249	6450 ATLANTA HIGHWAY P.O. BOX 240249 MONTGOMERY, AL 36124-0249

04132007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 64-6001060 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MCMILLAN, MR. FRANK
655 N. WYMORE ROAD
WINTER PARK, FL 32789

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2007

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MILLBURN, DENNIS S 5721 JACKSON RD WETUMPKA, AL 36093	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Peoples, Troy 133 Chubbehatchee Circle Wetumpka, AL 36093	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P EISELE, MELVIN K. 3363 MARLER RD PIKE ROAD, AL 36064	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Louis, Leslie 2595 Mitchell Creek Road Wetumpka, AL 36093	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KING, ED 257 COUNTY RD 521 HANCEVILLE, AL 35077	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Hutchinson, Rick 405 Young Street Butler, AL 36904	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S RIMER, FRED 185 CHUBBEHATCHEE CIR WETUMPKA, AL 36093	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PITMAN, TUI 443 NEW BINGHAM DR WETUMPKA, AL 36093	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MAPP, BERNELL 7030 TIFTON AVE MONTGOMERY, AL 36116	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: Melvin K Eisele 4-13-07 334-272-7493
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #