2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007901

FILED Apr 17, 2008 Secretary of State

Entity Name: WESTSIDE BAPTIST CHURCH OF DE FUNIAK SPRINGS, INC.

Current Principal Place of Business:			New Principal Place of Business:		
	(. 331 NORTH (SPRINGS, FL (32433			
Current Mailing Address:			New Mailing Address:		
P.O. BOX 2 DEFUNIAK	276 (SPRINGS, FL. (32433			
FEI Number:	59-2265393	FEI Number Applied For() Fi	El Number Not Appli	cable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
1473 KING DEFUNIAK		32433 US	ose of changing it	s registered office or registered agent, or both,	
SIGNATURE:					
	Electronic	Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () De NELSON, WILLIAM 1473 KINGS LAKE DEFUNIAK SPRIN	MR ERD	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	S () De GREEN, CLARIE 118 TWIN LAKE D DEFUNIAK SPRIN	R	Title: Name: Address: City-St-Zip:	S (X) Change () Addition CARPENTER, MARY 72 W. LARKSPUR AVE. DEFUNIAK SPRINGS, FL 32433	
Title: Name: Address: City-St-Zip:	T () De BROWN, BETTIE I 1075 JUNIPER LA DEFUNIAK SPRIN	L KE DRIVE	Title: Name: Address: City-St-Zip:	T (X) Change () Addition SULLIVAN, STEPHANIE L 362 COMMERCE CIRCLE DEFUNIAK SPRINGS, FL 32433	
Title: Name: Address: City-St-Zip:	AT () De JAMES, EDDIE 313 BOY SCOUT I DEFUNIAK SPRIN	RD	Title: Name: Address: City-St-Zip:	AT (X) Change () Addition CARPENTER, MARY 72 W. LARKSPUR AVE. DEFUNIAK SPRINGS, FL 32433	
Title: Name: Address: City-St-Zip:	T () De JERRY, SHERMAI 105 SWANEE AVE DEFUNIAK SPRIN	N ENUE	Title: Name: Address: City-St-Zip:	T (X) Change () Addition SAM, JONES 101 JONES LANE DEFUNIAK SPRINGS, FL 32433	
Title: Name: Address: City-St-Zip:	T () De GREEN, BOBBY 118 TWIN LAKE D DEFUNIAK SPRIN	RIVE	Title: Name: Address: City-St-Zip:	T (X) Change () Addition JORDAN, DAVE 88 RUCKEL DR. DEFUNIAK SPRINGS, FL 32433	

I hereby certify that the information supplied with this filing does not qualify 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: WILLIAM R. NELSON P 04/17/2008