


**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 25, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N01000007438</b> 1. Entity Name <b>ALL FAITH BAPTIST CHAPEL, INC.</b>	
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Principal Place of Business <b>302 LONGFELLOW BLVD LAKELAND, FL 33801</b>	Mailing Address <b>PO BOX 91838 LAKELAND, FL 33804-1838</b>
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**DO NOT WRITE IN THIS SPACE**



01122008 No Chg-NP CR2E037 (4/06)

4. FEI Number <b>65-1150258</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent

**RHODES, HARRY  
6919 RANCH RD  
LAKELAND, FL 33809-2270**

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_

<b>Filing Fee is \$61.25 Due by May 1, 2008</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RHODES, EUNICE M 6919 RANCH ROAD LAKELAND, FL 338092270
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRANKS, OLA 713 ROSE ST, #49 AUBURNDAL, FL 33823
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RHODES, HARRY J 6919 RANCH ROAD LAKELAND, FL 338092270
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01/29/08-80082-022 61.25

**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:**  **1-12-08 863-888-9670**  
\_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #