2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Apr 18, 2008 08:00 A Secretary of State DOCUMENT # N02332 1. Entity Name THE EASTERN AVENUE BAPTIST CHURCH, INC. Principal Place of Business Mailing Address 1001 EASTERN AVENUE PO BOX 701209 SAINT CLOUD FL 34770-1209 101 - 10TH STREET SAINT CLOUD FL 34769 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #. etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/07) Applied For City & State City & State 4. FEI Number 59-2758561 Not Applicable Zip Country Zφ Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RIGSBY, BILLY R. Street Address (P.O. Box Number is Not Acceptable) 1001 EASTERN AVENUE ST, CLOUD FL 34771 City 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 aristed name of registered agent and the if applicable. (NOTE: Registered Agent signature rod i red when roustating) DATE 444-5445 ritte Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Due By May 1, 2008 \Box Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE ☐ Delete TITLE Addition Changé OGDEN, VERNON M **U000000906900** MAME NAME 3587 STAR SHOWER CT US/US/U8-80016-024 61.25 STREET ADDRESS STREET ADDRESS KISSIMMEE FL 34744 CITY - ST- ZIP CITY-ST-ZiP ☐ Change TITLE Delete TITLE Addition HARTSOFF, HIRAM NAME NAME 309 17TH ST. STREET ADDRESS STREET ADDRESS SAINT CLOUD FL 34769 CITY-ST-ZIP CiTY-ST-ZiP TITLE ☐ Delate TITLE Change Addition RIGSBY, BILLY NAME NAME 2435 BARLOU CT STREET ADDRESS STREET ADDRESS SAINT CLOUD FL 34771 CITY-ST-ZIP CITY - ST - 78P THILE ☐ Delete 1014 Change ☐ Addition PARAS, SUSIE NAME NAME STREET ADDRESS 3035 HAM BROWN ROAD STREET ADDRESS KISSIMMEE FL 34746 CITY - ST - ZIP CITY-ST-ZIP SITUE Dalete Addition TOLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 outs, 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:

SUSIE PARAS, SEC. Treas. 4-15-08 407-847-9664