


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008 08:00 AM
Secretary of State

DOCUMENT # N03000002472
 1. Entity Name
FIRST BAPTIST CHILDREN'S ACADEMY, INC.



Principal Place of Business Mailing Address
1570 W MAIN STREET **PO BOX 1718**
WAUCHULA, FL 33873 **WAUCHULA, FL 33873**

DO NOT WRITE IN THIS SPACE



04112008 No Chg-NP CR2E037 (4/06)

4. FEI Number 01-0773533	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
HUGHES, MISTY W
712 CROSBY LANE
WAUCHULA, FL 33873

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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 May 1, 2008

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

U00000920834
 05/14/08-80060-011 70.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HUGHES, MISTY W 712 CROSBY LANE WAUCHULA, FL 33873
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ATCHLEY, TERRY 1035 KNOLLWOOD CIRCLE WAUCHULA, FL 33873
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CONLEY, TERRI 2825 E. MAIN STREET WAUCHULA, FL 33873
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WALKER, KATHY 4162 W. MAIN STREET WAUCHULA, FL 33873
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD CONERLY, DOTTIE PO BOX 413 WAUCHULA, FL 338730413
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CHRISTIAN, JEREMY 101 SOUTH 3RD AVE WAUCHULA, FL 33873

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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: *x Misty Hughes*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date _____ Daytime Phone # _____