


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # N04000008031			FILED	
1. Entity Name SAN PEDRO BAPTIST CHURCH, INC.			06 JUN 14 PM 4:52	
Principal Place of Business 4420 SAN PEDRO RD. PERRY, FL 32348		Mailing Address P. O. BOX 1794 PERRY, FL 32348		
2. Principal Place of Business 4420 San Pedro Rd.		3. Mailing Address P.O. Box 1794		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		
City & State Perry, Florida		City & State Perry, Florida		
Zip 32347		Zip 32348		
Country Taylor		Country Taylor		
6. Name and Address of Current Registered Agent		4. FEI Number 59-3173780		
TAYLOR, NINA 2677 E. ELLISON RD. PERRY, FL 32348		Applied For Not Applicable		
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
7. Name and Address of New Registered Agent		Name Same		
		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: <u>Nina Taylor</u> <u>nina Taylor (Treasurer)</u> <u>6-9-06</u>				
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agents signature required when reinstating) DATE				
Filing Fee is \$61.25 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		10. Make check payable to Florida Department of State
		\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T PADGETT, JOHN 270 MCKINLEY-MADDOX RD. PERRY, FL 32348	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T TAYLOR, GEORGE 2677 E. ELLISON RD. PERRY, FL 32348	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T JACKSON, JIM 2795 WARD RD. PERRY, FL 32348	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: <u>George Taylor</u> <u>George Taylor</u> <u>6-9-06</u> <u>(850)584-3581</u>				
Signature and typed or printed name of signing officer or director Date Daytime Phone #				

6601031
05/01/06 01018 006 7875
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05082006 Chg-NP CR2E037 (4/06)

4. FEI Number 59-3173780 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent
Name: Same
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: Nina Taylor nina Taylor (Treasurer) 6-9-06

Filing Fee is \$61.25 Due by September 6, 2006
9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees
10. 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 PADGETT, JOHN 270 MCKINLEY-MADDOX RD. PERRY, FL 32348	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP
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SIGNATURE: George Taylor George Taylor 6-9-06 (850)584-3581