2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008318

Entity Name: THE WAY BAPTIST CHURCH, INC.

FILED Apr 30, 2006 Secretary of State

84 COMANCHE TRAIL
CRAWFORDVILLE, FL 32327
781 SPRING CREEK HWY
CRAWFORDVILLE, FL 32327
CRAWFORDVILLE, FL 32327

Current Mailing Address: New Mailing Address:

84 COMANCHE TRAIL P.O. BOX 1089

CRAWFORDVILLE, FL 32327 CRAWFORDVILLE, FL 32326

FEI Number: 20-3300806 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MCCALLISTER, HUGH 781 SPRING CREEK HWY CRAWFORDVILLE, FL 32327 US

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.

SIGNATURE:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: () Change() Addition

 Name:
 MCCALLISTER, HUGH
 Name:

 Address:
 781 SPRING CREEK HWY.
 Address:

 City-St-Zip:
 CRAWFORDVILLE, FL 32327
 City-St-Zip:

 Title:
 SEC.
 () Delete
 Title:
 SEC.
 (X) Change () Addition

 Name:
 STOKLEY, LISA
 Name:
 MORGAN, DOUG

Address: 84 COMANCHE TRAIL Address: 159 MULBERRY CIRCLE
City-St-Zip: CRAWFORDVILLE, FL 32327 City-St-Zip: CRAWFORDVILLE, FL 32327

Title: TRE. () Delete Title: TRE. (X) Change () Addition

Name:STOKLEY, HARVIEName:MCCALLISTER, NELLAddress:84 COMANCHE TRAILAddress:781 SPRING CREEK HWYCity-St-Zip:CRAWFORDVILLE, FL 32327City-St-Zip:CRAWFORDVILLE, FL 32327

I hereby certify that the information supplied with this filing does not qualify for the 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: HUGH MCCALLISTER P 04/30/2006