

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2007 8:00 am
Secretary of State

03-28-2007 90011 036 ****61.25

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02152007 Chg-NP CR2E037 (12/06)

DOCUMENT # N05000008810 1. Entity Name PROVIDENCE VILLAGE BAPTIST CHURCH, INC.					
Principal Place of Business 4504 WEST STATE ROAD 238 LAKE BUTLER, FL 32054				Mailing Address 4504 WEST STATE ROAD 238 LAKE BUTLER, FL 32054	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2375226	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent ALEXANDER, WARREN 2104 SE COUNTY ROAD 252 LAKE CITY, FL 32025				7. Name and Address of New Registered Agent Name <u>DERICK THOMAS</u> Street Address (P.O. Box Number is Not Acceptable) <u>259 SW GUSTY GLEN</u> City <u>LAKE CITY</u> <u>FL</u> Zip Code <u>32025</u>	
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>Derick Thomas</u>		DATE <u>3-18-07</u>			
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
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	P HAMMOCK, ALAN D 8849 47TH PLACE LIVE OAK, FL 32060	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT DERICK THOMAS 259 SW GUSTY GLEN LAKE CITY FL 32025
		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ALEXANDER, WARREN 2104 SE COUNTY ROAD 252 LAKE CITY, FL 32025	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT JERED BIELLING 5001 WEST SR 238 LAKE BUTLER, FL 32054
		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC LAWRENCE, PAULA 150 NW LAVADA STREET LAKE CITY, FL 32055	<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		<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		<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>Derick Thomas</u>		Date <u>3-18-07</u>		Daytime Phone # <u>(386) 623-5333</u>	