


# 2008 ~~NOT-FOR-PROFIT~~ CORPORATION ANNUAL REPORT

**FILED**  
**Jan 31, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N06000009077</b>		
1. Entity Name OAK GROVE BAPTIST CHURCH OF CENTURY, FLORIDA, INC.		
Principal Place of Business 2600 NORTH HIGHWAY 99 CENTURY, FL 32535	Mailing Address 2600 NORTH HIGHWAY 99 CENTURY, FL 32535	



01092008 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-2388848	Applied For Not Applicable
-----------------------------	-------------------------------

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

**6. Name and Address of Current Registered Agent**

GODWIN, ROY D  
5870 ARTHUR BROWN ROAD  
WALNUT HILL, FL 32568

**DO NOT WRITE  
IN THIS SPACE**

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**

**10. OFFICERS AND DIRECTORS**

TITLE	C
NAME	GODWIN, ROY D
STREET ADDRESS	5870 ARTHUR BROWN ROAD
CITY-ST-ZIP	WALNUT HILL, FL 32568
TITLE	C
NAME	CARPENTER, GEORGE V
STREET ADDRESS	1901 WILMA ROAD
CITY-ST-ZIP	MCDavid, FL 32568
TITLE	S
NAME	DARBY, WILLIAM T
STREET ADDRESS	4350 GOBBLER ROAD
CITY-ST-ZIP	CENTURY, FL 32535
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000809237  
02/08/08-80015-002 61.25

**DO NOT WRITE  
IN THIS SPACE**

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:** Roy D. Godwin Roy D. Godwin 1-28-08 850-327-4778  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #