2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 17, 2008
Secretary of State

DOCUMENT# N06000009396

Entity Name: HOPEWELL BAPTIST CHURCH OF MADISON, INC.

Current Principal Place of Business:

4730 SE CR 360
MADISON, FL 32340

New Principal Place of Business:

Current Mailing Address:

4730 SE CR 360
MADISON, FL 32340

New Mailing Address:

2858 SW OLD ST AUGUSTINE RD
MADISON, FL 32340

FEI Number: 59-2366157 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SAPP, ED
2858 SW OLD ST SUGUSTINE RD
MADISON, FL 32340 US

Name and Address of New Registered Agent:

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:

Title: P ( ) Delete
Name: THOMPSON, TIM
Address: P O BOX 186
City-St-Zip: LEE, FL 32059

Title: VP ( ) Delete
Name: SAPP, BUDDY
Address: 3105 SW CR 360
City-St-Zip: MADISON, FL 32340

Title: S (X) Delete
Name: STROUGHTON, JOHN
Address: 18711 52ND TERRACE
City-St-Zip: LIVE OAK, FL 32060

Title: T ( ) Delete
Name: WESSON, DAVID
Address: 2548 SW OLD ST AUGUSTINE RD
City-St-Zip: MADISON, FL 32340

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: WILLIAM E SAPP C 09/17/2008

Electronic Signature of Signing Officer or Director — Date