## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## Apr 11, 2008 8:00 am Secretary of State DOCUMENT # N07000001271 1. Entity Name 04-11-2008 90041 010 \*\*\*\*70.00 THE GOSPEL BARN CHURCH, INC. Principal Place of Business Mailing Address 7351 SE 196TH AVENUE MORRISTON FL 32668 7351 SE 196TH AVENUE MORRISTON FL 32668 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Aut. #, etc. Suite, Apr. #, etc. 1st MOORE CR2E037 (10/07) City & State City & State 4. FEI Number Applied For 770672448 Not Applicable Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired X Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MAXWELL, GEORGE M Street Address (P.O. Box Number is Not Acceptable) 14677 SW 35TH TERRACE ROAD OCALA FL 34473 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 (NOTE: Registered Agent signature required when reinstaung) CATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to. Due By May 1, 2008 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE TITLE ☐ Delete ☐ Change Addition WISEMAN, FARI B NAME NAME 7271 SE 196TH AVENUE STREET ADDRESS STREET ADDRESS MORRISTON FL 32668 CITY - \$1 - 7/P CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition STONE, HAROLD E NAME NAME 10150 NW 21ST STREET STREET ADDRESS STREET ADDRESS CITY-ST-7IP OCALA FL 34482 CITY-ST-ZIP D TITLE ☐ Delete TIT: F Change Addition NAME CANNON, ELEANOR NAME STREET ADDRESS 16450 SE 67TH PLACE STREET ADDRESS MORRISTON FL 32668 CITY-ST-7IP CITY-ST-ZIP Delete BILLE Change Addition MAXWELL, GEORGE M HAZE NAME STREET ADDRESS 7351 SE 196TH AVENUE STREET ADDRESS CITY-ST-ZIP MORRISTON FL 32668 C177-ST-7/P THILE Dalete THE ☐ Change Addition MAXWELL, WANDA M NAME NAME 7351 SE 196TH AVENUE STREET AUDRESS STREET ADDRESS MORRISTON FL 32668 CITY-ST-ZIP CHY-ST-ZIP THE Delete TITLE ☐ Change ☐ Addition MANAG STREET ADDRESS STREET ADDRESS

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 outri, that I am an officer or director of the corporation or the reserver or trusted 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

U17Y-51-2/P

CITY-ST-ZIP

George M. MAXWELL engl M. Maxwell President 03/3/108 352-245-8429