

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010415

FILED
May 02, 2008
Secretary of State

Entity Name: NAPLES BAPTIST CHURCH, INC.

Current Principal Place of Business:

11983 TAMIAMI TRAIL NORTH 154
NAPLES, FL 34110

New Principal Place of Business:

Current Mailing Address:

11983 TAMIAMI TRAIL NORTH 154
NAPLES, FL 34110

New Mailing Address:

FEI Number: 20-1716905 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:

Name and Address of New Registered Agent:

PIAZZA, MICHAEL
15621 MARCELLO CIRCLE
NAPLES, FL 34110 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:

Title: D () Delete
Name: COWEN, FORREST
Address: 3144 SUNDANCE CIRCLE
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: DEVRIES, FRANKLIN
Address: 3 ST JOHN STREET
City-St-Zip: NAPLES, FL 34110

Title: D () Delete
Name: PIAZZA, MICHAEL
Address: 15621 MARCELLO CIRCLE
City-St-Zip: NAPLES, FL 34110

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PIAZZA, JENNA
Address: TAMIAMI TRAIL N.
City-St-Zip: NAPLES, FL 34110

Title: D (X) Change () Addition
Name: DEVRIES, FRANKLIN
Address: TAMIAMI TRAIL N.
City-St-Zip: NAPLES, FL 34110

Title: D (X) Change () Addition
Name: PIAZZA, MICHAEL
Address: TAMIAMI TRAIL N.
City-St-Zip: NAPLES, FL 34110

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: MICHAEL PIAZZA

D

05/02/2008

Electronic Signature of Signing Officer or Director

Date