2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2007
Secretary of State

DOCUMENT# N22727

Entity Name: NORTH NAPLES BAPTIST CHURCH, INC.

Current Principal Place of Business:

1811 OAKS BLVD
NAPLES, FL 34119 US

New Principal Place of Business:

Current Mailing Address:

1811 OAKS BLVD
NAPLES, FL 34119 US

New Mailing Address:

FEI Number: 52-1546695 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HELTON, GLENN H PASTOR
1811 OAKS BLVD
NAPLES, FL 34119 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: DT ( ) Delete
Name: THORNTON, GLEN
Address: 1261 TRAIL TERRACE DR
City-St-Zip: NAPLES, FL 34103

Title: DT ( ) Delete
Name: COLDING, SAM
Address: 659 10TH STREET N
City-St-Zip: NAPLES, FL 34102

Title: DT ( ) Delete
Name: FOWLER, WAYNE
Address: 2840 70TH STREET SW
City-St-Zip: NAPLES, FL 34105

Title: T ( ) Delete
Name: VENTRY, DIEDRA
Address: 575 93RD AVE N
City-St-Zip: NAPLES, FL 34108

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change ( ) Addition
Name: SHAW, DON
Address: 5333 HAWTHORN WOODS WAY
City-St-Zip: NAPLES, FL 34116

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

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

Title: T (X) Change ( ) Addition
Name: SEXTON, MARY ANN
Address: 389 HERON AVE
City-St-Zip: NAPLES, FL 34108

I hereby certify that the information supplied with this filing does not qualify for the 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: MARY ANN SEXTON T 01/04/2007

Electronic Signature of Signing Officer or Director — Date