## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 05, 2008 8:00 am Secretary of State

<del></del>					S	ecret	arv /	nt Ste	ate	
DOCUMENT # N32437  1. Entity Name FAMILY BIBLE CHURCH, INC. OF PONTE VEDRA, FLORIDA					Secretary of State 03-05-2008 90023 028 ****61.75					
Principal Place of Business 4760 PALM VALLEY RD 2849 BARRETT ROAD PONTE VEDRA BEACH, FL 32082 US JACKSONVILLE, FL 32246					4 <b>(54 m/g), 183</b> m	778 (7877 B17880 HU)		#10# 111## 8#10 #11	<b>1118) 61 (88)</b>	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 6175 White Tip Kel								
Suite, Apt. #, etc.		Suite, Apt. #, etc.		0	2262008	Chg-NP	CR2E	037 (12/06)		
City & State		City & State JACKSONVILLE FL		4.	4. FEI Number Applied For 59-2963929 Not Applicable					
Zip	Country	Zip	Country	5.	Certificate of		d 🔲	\$8.75 Add	ditional	
	S. Norma and Address of Comment		Dural		Name and A	ddaena of No.	- Danleton	<u></u>	<del></del>	
6. Name and Address of Current Registered Agent  ELLIOTT, GARY D.			Name	7. Name and Address of New Registered Agent Name						
2849 BAR	RETT ROAD MILLE, FL 32216		Street Address			(P.O. Box Number is Not Acceptable)				
JACKSON	WICLE, I L 32210									
			City				F	1		
	named entity submits this statement for tions of registered agent.	or the purpose of changing its reg	gistered office or	registered a	igent, or both,	in the State of	f Florida. Tai	n familiar with,	and accept	
SIGNATURE .										
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	gistered Agent signatu	ure required wher	reinstating)		DATE			
SIGNATURE	Signature, typod or printed name of registered agont Filling Fee is \$61.25 Due by May 1, 2008	and title if applicable. (NOTE: Re-	aign Financing	_ \$5	.00 May Be	F	Make che	ck payable t		
SIGNATURE	Filing Fee is \$61.25 Due by May 1, 2008 OFFICERS AND DI	9. Election Campa Trust Fund Cont	aign Financing	\$5 D Adx	.00 May Be led to Fees		Make che lorida Dep	ck payable t	tate	
	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campa Trust Fund Cont	aign Financing tribution.	S5 Add	.00 May Be led to Fees	IGES TO OFFI	Make che lorida Dep CERS AND I	ck payable t artment of S	tate	
10. ITILE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2008  OFFICERS AND DIE PD ELLIOTT, GARY D. 2849 BARRETT RD.	Election Campa     Trust Fund Cont  RECTORS	aign Financing tribution.	S5 Add	.00 May Be led to Fees	IGES TO OFFI	Make che lorida Dep CERS AND I	ck payable t artment of S	tate N 10	
10. IITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2008  OFFICERS AND DII PD ELLIOTT, GARY D. 2849 BARRETT RD. JACKSONVILLE, FL 32246  VTD BOATWRIGHT, DONN 14501 AQUA VISTA COURT	9. Election Campa Trust Fund Cont RECTORS	aign Financing tribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME	□ \$5 ADD ADD 6175 Jackse	.00 May Be ded to Fees ITIONS/CHAN White May Ville	Tip R	Make che lorida Dep CERS AND I	ck payable t artment of S DIRECTORS IN (2 Change	tate V 10 Addition	
10.  IITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2008  OFFICERS AND DIE  PD ELLIOTT, GARY D. 2849 BARRETT RD. JACKSONVILLE, FL 32246  VTD BOATWRIGHT, DONN 14501 AQUA VISTA COURT JACKSONVILLE, FL 32224 DS WILLIAMS, SONNY SR 5634 ST ISABEL DR	9. Election Campa Trust Fund Cont  RECTORS  Delete	aign Financing tribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME	□ \$5 ADD ADD 6175 Jackse	.00 May Be led to Fees	Tip R	Make che lorida Dep CERS AND I	ck payable t artment of S DIRECTORS IN Change	N 10 Addition	
10.  ITTLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2008  OFFICERS AND DIE  PD ELLIOTT, GARY D. 2849 BARRETT RD. JACKSONVILLE, FL 32246  VTD BOATWRIGHT, DONN 14501 AQUA VISTA COURT JACKSONVILLE, FL 32224 DS WILLIAMS, SONNY SR 5634 ST ISABEL DR	9. Election Campa Trust Fund Cont  RECTORS  Delete  Delete	aign Financing tribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	□ \$5 ADD ADD 6175 Jackse	.00 May Be ded to Fees ITIONS/CHAN White May Ville	Tip R	Make che lorida Dep CERS AND I	ck payable to artiment of S  DIRECTORS IN  Change  Change	Addition  Addition	

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:** 

SIGNATURE AND PYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gary D. Elliott

3-3-08

904 280-5694

Daytima Phone #