

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34250

FILED  
Apr 28, 2008  
Secretary of State

**Entity Name:** FIRST BAPTIST CHURCH OF CARRABELLE, INC.

**Current Principal Place of Business:**

206 SE AVE A  
CARRABELLE, FL 32322

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 768  
CARRABELLE, FL 32322

**New Mailing Address:**

**FEI Number:** 59-2265361      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CLARK, MIKEL  
206 S. E. AVENUE A P. O. BOX 768  
CARRABELLE, FL 32322 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: TD ( ) Delete  
Name: CLARK, MIKEL  
Address: 308 TALLAHASSEE STREET  
City-St-Zip: CARRABELLE, FL 32322

Title: TDT ( ) Delete  
Name: MIRABELLA, RUTH  
Address: 612 3RD ST  
City-St-Zip: CARRABELLE, FL 32322

Title: TD ( ) Delete  
Name: JACKSON, BECKY  
Address: 508 RYAN DRIVE  
City-St-Zip: CARRABELLE, FL

Title: TP ( ) Delete  
Name: WINCHESTER, SIDNEY  
Address: P. O. BOX 143  
City-St-Zip: CARRABELLE, FL 32322

**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: MIKEL CLARK

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

TD

04/28/2008

\_\_\_\_\_  
Date