2008 NOT-FOR-PROFIT CORPORATION

FILED Mar 31, 2008 8:00 am Secretary of State **ANNUAL REPORT**

PENSACOLA, FL 32507 US Suite, Apt. #, etc.	PERDIDO	e	# N36511 PTIST CHURCH,	INC.			Δ Δ	3-31-2008 900	-	
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City & State Country Count	2. Principal P	lace of Busine	ess - No P.O. Box #	3. Mailing Address						
Secretary Secr	Suite, Apt.	#, etc.		Suite, Apt. #, etc.			03262008 C	hg-NP (CR2E037 (12/0	3)
Signature: City FL Zip Code	City & State	9		City & State	• •		4. FEI Number 59-301352	24		
Name	Zip		Country	Zip	Cou	ntry	5. Certificate of S	tatus Desired	□ \$8.75 Fee Requ	Additional iired
BENNETT, REBECCA 1754 BEACHSIDE DRIVE PENSACOLA, FL 32508 City City FL Zip Code Florida Department of State City Florida Department of State City Florida Department of State City Florida Department of State Cluster Florida Department of State Cluster Cluster Florida Department of State Cluster Florida Department of State Florida De		6. Name	and Address of Current	Registered Agent			7. Name and Add	fress of New Reg	istered Agent	
Signature Sign	DENMETT	DEBECC	٨			Name				i
B. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. 1 am familiar with, and accept the obligations of registered agent. Signature, hoed of phines field in digitative in applicable. (NOTE Registered Agent agents required phine restative). DATE Signature, hoed of phines field in digitative in applicable. (NOTE Registered Agent agents required phine restative). DATE Signature, hoed of phines field in digitative in applicable. (NOTE Registered Agent agents required phine restative). DATE Signature, hoed of phines field in digitative in applicable. (NOTE Registered Agent agents required phine restative). DATE Signature, hoed of phines field in digitative in applicable. (NOTE Registered Agent agents required phine restative). DATE Signature, hoed of phines field in digitative in applicable. (NOTE Registered Agent agents required phine restative). DATE TILE DUE OFFICERS AND DIRECTORS 11. Addition NAME SITERET AGRESS OFFICERS AND DIRECTORS IN 10 TILE DOUBLY, TOM NAME SITERET AGRESS OFFICERS AND DIRECTORS IN 10 Delete TILE DOUBLY, TOM Delete TILE DOUBLY, TOM NAME SITERET AGRESS OFFICERS AND DIRECTORS IN 10 Delete TILE NAME SITERET AGRESS OFFICERS AND DIRECTORS IN 10 Delete TILE S SOUMA, JOHN SITERET AGRESS OFFICERS AND DIRECTORS OFFICERS AND DIRECTORS IN 10 Delete TILE Delete TILE NAME SITERET AGRESS OFFICERS AND DIRECTORS OFFICERS AND DIRECTORS IN 10 Delete TILE Delete TILE NAME SITERET AGRESS OFFICERS AND DIRECTORS OFFICERS OFFICERS AND DIRECTORS OFFICERS OFF	1754 BEAG	CHSIDE D	RIVE			Street Addre	ess (P.O. Box Number is	Not Acceptable)		
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature. Signature, noted of obtained individual signature last if repetables. PHINE Foe is \$61:25 Due by May 1, 2008 S. Election Campaign Financing Trust Fund Contribution. Delete Title PO OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE PO Delete Title DO DELET DO DE						City			El Zip C	code
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Signature, speed of pières réalité d'inférité de la réplacable NOTE Regissered Agent agrature requiting Durb	the obligat	ions of registe	exed agent	s. the perpose of changing	ia rogiotoro		rotorou agont, or actif, in			,
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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:

3-26-08