

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40231

FILED
Apr 23, 2007
Secretary of State

Entity Name: CENTRAL BIBLE BELIEVING (K.J.V.) BAPTIST CHURCH, INC.

Current Principal Place of Business:

10 POWELL LANE
CRAWFORDVILLE, FL 32327

New Principal Place of Business:

Current Mailing Address:

10 POWELL LANE
CRAWFORDVILLE, FL 32327

New Mailing Address:

FEI Number: 59-2856983

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOLSOM, DAVID A
10 POWELL LANE
CRAWFORDVILLE, FL 32327 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: PCEO () Delete
Name: FOLSOM, DAVID A
Address: 27 SUMMER BROOKE LN.
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: AS () Delete
Name: CHESTNUT, HARLAN
Address: 118 KINGS RD
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: AT () Delete
Name: MORGAN, DAN
Address: 252 GREENLEA CIRCLE
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: AT () Delete
Name: NELSON, GARY
Address: 1854 OAKRIDGE AVE
City-St-Zip: GRAND RIDGE, FL 32442

Title: VPT () Delete
Name: SHEPPARD, JON
Address: 21 CALVARY CT.
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: S () Delete
Name: DAVIS, ARLAN
Address: 166 LESLIE CIRCLE
City-St-Zip: CRAWFORDVILLE, FL 32327

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:

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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 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: DAVID A. FOLSOM

PCEO

04/23/2007

Electronic Signature of Signing Officer or Director

Date