2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Feb 09, 2006 8:00 am Secretary of State DOCUMENT # N45186 1. Entity Name 02-09-2006 90021 041 ****61.25 BRANNONVILLE BAPTIST CHURCH, INC. Principal Place of Business Mailing Address 4113 BARBER ST 4113 BARBER ST PANAMA CITY FL 32404 PANAMA CITY FL 32404 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For 59-3117237 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ISLER, JACK L Street Address (P.O. Box Number is Not Acceptable) 4306 BRANNON ROAD PANAMA CITY FL 32404 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 PD TITLE □ Delete TITLE ☐ Change Addition ISLER, JACK L NAME NAME 4306 BRANNON RD STREET ADDRESS STREET ADDRESS PANAMA CITY FL CITY-ST-ZIP CITY-ST-ZIP SD TITLE Delete ☐ Change ☐ Addition NORWOOD, GERALD T NAME 10731 JOHNSON BLVD. STREET ADDRESS STREET ADDRESS YOUNGSTOWN FL CITY-ST-ZIP CITY-ST-ZIP TD TITLE Delete Change ☐ Addition GALLOWAY, WILLARD NAME NAME STREET ADDRESS 8429 WALLCRAFT AVENUE STREET ADDRESS CITY-ST-ZIP YOUNGSTOWN FL CITY-ST-ZIP ☐ Oelete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

MARLIANA

1/27/06 600 501-5208

FILED