

2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

FILED
Mar 24, 2008 8:00 am
Secretary of State

03-24-2008 90051 001 ****61.25

DOCUMENT # N93000003655

1. Entity Name
FIRST BAPTIST CHURCH OF QUINCY, INC.



Principal Place of Business
**210 WEST WASHINGTON STREET
QUINCY, FL 32351**

Mailing Address
**PO BOX 70
QUINCY, FL 32353**

40050800



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03102008 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
59-0760202

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FAIRCLOTH, J. NEAL
221 W. WASHINGTON ST.
QUINCY, FL 32351**

Name
REESE, SUSAN

Street Address (P.O. Box Number is Not Acceptable)
996 AUGUSTINE RD

City
QUINCY

FL

Zip Code
32351

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.

SIGNATURE **Susan Reese P/D**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DV
REESE, SUSAN
996 AUGUSTINE RD
QUINCY, FL 32351 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
REESE, SUSAN
996 AUGUSTINE RD
QUINCY, FL 32351 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
BROCK, LINDA
815 HILLCREST AVE
QUINCY, FL 32351 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
COOPER, JACK
1700 MAX HERRIN RD
CHATTAHOOCHEE, FL 32324 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
DAVIS, BARBARA
HWY 12
QUINCY, FL 32351 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MASSEY, R. L.
1902 W FRANKLIN ST
QUINCY, FL 32351 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
FAIRCLOTH, J. NEAL
221 W WASHINGTON ST
QUINCY, FL 32351 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MASON, DeVANE
454 ELISE DR
QUINCY, FL 32351 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
RHOADS, FRED
319 N 11TH ST
QUINCY, FL 32351 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
CHANDLER, DORIS
506 N STEWART ST
QUINCY, FL 32351 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
DAVIS, H. JEFF
943 ATTAPULGUS HWY
QUINCY, FL 32352 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ 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:

Susan Reese, P/D

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Susan Reese 3/19/08 (850) 922-9381