## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N93000004079

Address:

City-St-Zip:

Entity Name: SARDIS BAPTIST CHURCH, INC

FILED Jan 25, 2007 Secretary of State

Entity Nai	me: SARDIS	BAPTIST CHURC	H, INC.					
Current Principal Place of Business:					New Principal Place of Business:			
P.O. BOX 60 HWY 121 WORTHINGTON SPRINGS, FL 32697					11981 SW 37 WAY HWY 121 WORTHINGTON SPRINGS, FL 32697			
Current M	lailing Addre	ess:	New Ma	New Mailing Address:				
P.O. BOX HWY 121 WORTHIN		NGS, FL 32697						
FEI Number	: 59-3179169	FEI Number Appl	ied For()	FEI Number Not Ap	oplicable ( )	Certificat	e of Status Desire	<b>;</b> d ( )
Name and	l Address of	Current Register	ed Agent:	Name ar	nd Address o	of New Regi	stered Agent:	
ELIRSOL, ALFRED 11286 WEST CO RD 78 PO BOX 32/HWY 121 WORTHINGTON SPRINGS, FL 32697 US					ELIXSON, ALFRED 11286 WEST CO RD 78 HWY 121 WORTHINGTON SPRINGS, FL 32697 US			
	e named entity e of Florida.	submits this state	ment for the pu	ırpose of changinç	g its registere	d office or re	egistered agent,	or both,
SIGNATU	RE: ALFRED	ELIXSON				01	/25/2007	
	Electro	onic Signature of Re	egistered Ager	nt			Date	
OFFICER	S AND DIRE	CTORS:		ADDITIO	NS/CHANG	ES TO OFFI	CERS AND DI	RECTORS:
Title: Name: Address: City-St-Zip:	ELIXSON, ALI P.O. BOX 60/	) Delete FRED HYW 121 N/A ON SPRING, FL 32697	7	Title: Name: Address: City-St-Zip	:	() Change (	) Addition	
Title: Name: Address: City-St-Zip:	PATRICK, JO P.O. BOX 60			Title: Name: Address: City-St-Zip	:	() Change (	) Addition	
Title: Name: Address: City-St-Zip:	ELLIS, DWAY P O BOX 60/F		97	Title: Name: Address: City-St-Zip	:	() Change (	) Addition	
Title: Name: Address: City-St-Zip:	WHITEHEAD, PO BOX 44 N			Title: Name: Address: City-St-Zip	:	() Change (	) Addition	
Title: Name:	(	) Delete		Title:	D KIRKI AND	() Change ()	K) Addition	

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.

Address:

PO BOX 60 N/A

City-St-Zip: WORTHINGTON SPRINGS, FL 32697

SIGNATURE: ALFRED ELIXSON D 01/25/2007