2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2008
Secretary of State

DOCUMENT# N94000001259

Entity Name: RIDGEWOOD AVENUE BAPTIST CHURCH INCORPORATED

Current Principal Place of Business:

501 RIDGEWOOD AVE
HOLLY HILL, FL 32117

New Principal Place of Business:

Current Mailing Address:

501 RIDGEWOOD AVE
HOLLY HILL, FL 32117

New Mailing Address:

FEI Number: 59-0867195 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VARGA, GABRIEL J PASTOR
501 RIDGEWOOD AVE
HOLLY HILL, FL 32117 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:	PD	( ) Delete
Name:	VARGA, GABRIEL J PASTOR	
Address:	1226 GAMBLE PLACE	
City-St-Zip:	DAYTONA BEACH, FL 32118	
Title:	TD	( ) Delete
Name:	BARBEE, RACHEL C	
Address:	292 EDDIE AVENUE	
City-St-Zip:	HOLLY HILL, FL 32117	
Title:	SD	( ) Delete
Name:	WHEDBEE, NANCY MRS.	
Address:	2047 BRIEN AVE.	
City-St-Zip:	SOUTH DAYTONA BEACH, FL 32119	
Title:	D	( ) Delete
Name:	RAFFERTY, DORIS V	
Address:	3202 LA PALOMA	
City-St-Zip:	DAYTONA BEACH SHORES, FL 32118	
Title:		( ) Delete
Name:		
Address:		
City-St-Zip:		
Title:		( ) Delete
Name:		
Address:		
City-St-Zip:		

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:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	( ) Change (X) Addition
Name:	VARGA, BARBARA L MRS	
Address:	1226 GAMBLE PL	
City-St-Zip:	DAYTONA BEACH, FL 32118	
Title:	D	( ) Change (X) Addition
Name:	WHEDBEE, BILLIE JO MR	
Address:	2047 BRIEN AVE	
City-St-Zip:	SOUTH DAYTONA BEACH, FL 32119	

I hereby certify that the information supplied with this filing does not qualify 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: GABRIEL J VARGA PD 03/31/2008

Electronic Signature of Signing Officer or Director — Date