

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001619

FILED
Mar 24, 2008
Secretary of State

Entity Name: GRAND ISLAND BAPTIST CHURCH, INC.

Current Principal Place of Business:

13229 COUNTY RD 44
GRAND ISLAND, FL 32735

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 350759
GRAND ISLAND, FL 32735

New Mailing Address:

FEI Number: 59-3236240

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GATCH, SADIE
2551 GETFORD
EUSTIS, FL 32726 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: FEEZOR, DONALD J JR
Address: 11410 LAKE DR
City-St-Zip: LEESBURG, FL 34788

Title: VD () Delete
Name: SCHMIDT, DENNIS
Address: 11750 WATTS CT.
City-St-Zip: TAVARES, FL 32778

Title: SD () Delete
Name: AMOS, SHIRLEY J
Address: 3513 INDIAN TRAIL
City-St-Zip: EUSTIS, FL 32726

Title: TD () Delete
Name: HAWKINS, MARK
Address: 4133 N. BABB RD
City-St-Zip: UMATILLA, FL 32784

Title: D () Delete
Name: GATCH, SADIE
Address: 2551 GETFORD RD
City-St-Zip: EUSTIS, FL 32726

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
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 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: MARK HAWKINS

TD

03/24/2008

Electronic Signature of Signing Officer or Director

Date