

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005184

FILED
Apr 30, 2008
Secretary of State

Entity Name: GASKIN FIRST BAPTIST CHURCH, INC.

Current Principal Place of Business:

107 CO HWY 181 EAST{
WESTVILLE, FL 32464 US

New Principal Place of Business:

Current Mailing Address:

107 CO. HWY 181 EAST
WESTVILLE, FL 32464 US

New Mailing Address:

FEI Number: 59-3050238

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREEN, WILLIAM H
22 EAST BALDWIN AVE.
DEFUNIAK SPRINGS, FL 32433 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: D () Delete
Name: COLLINSWORTH, BOBBY R
Address: 2007 COLLINSWORTH RD
City-St-Zip: WESTVILLE, FL

Title: DP () Delete
Name: MITCHEM, KENNETH
Address: 508 PUNCH BOWL RD
City-St-Zip: DEFUNIAK SPRINGS, FL

Title: DT () Delete
Name: BRONSON, VIOLET
Address: 1281 BRAXTON RD
City-St-Zip: WESTVILLE, FL 32464

Title: S () Delete
Name: PETERS, VONNIE
Address: 1328 COLLINSWORTH RD
City-St-Zip: WESTVILLE, FL 32464

Title: AT () Delete
Name: BECK, TAMMY
Address: 1276 BRAXTON RD.
City-St-Zip: WESTVILLE, FL 32464

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DT (X) Change () Addition
Name: ALBERSON, CHERYL
Address: 249 BRAXTON RD
City-St-Zip: WESTVILLE, FL 32464

Title: S (X) Change () Addition
Name: COLLINSWORTH, HAZEL
Address: 2007 COLLINSWORTH RD
City-St-Zip: WESTVILLE, FL 32464

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: CHERYL ALBERSON

T

04/30/2008

Electronic Signature of Signing Officer or Director

Date