


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 12, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N95000000778</b>		
1. Entity Name <b>GREENVILLE BAPTIST CHURCH INCORPORATED</b>		
Principal Place of Business <b>640 S. GRAND ST. GREENVILLE FL 32331</b>	Mailing Address <b>P.O. BOX 27 GREENVILLE FL 32331</b>	
2. Principal Place of Business - No P.O. Box #	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	
Zip	Country	Zip Country



1st MOORE CR2E037 (10/07)

4. FEI Number <b>59-3395668</b>		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required

<b>6. Name and Address of Current Registered Agent</b>	<b>7. Name and Address of New Registered Agent</b>
<b>DAY, LAWRENCE NW 10 LOOP P O BOX 303 GREENVILLE FL 32331</b>	Name
	Street Address (P.O. Box Number is Not Acceptable)
	City <span style="float: right;"><b>FL</b> Zip Code</span>

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title (if applicable). (NOTE: Registered Agent signature required when re-instating) DATE

<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2008</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	<b>Make Check Payable to Florida Department of State</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	<b>D</b> <input type="checkbox"/> Delete <b>DAY, LAWRENCE</b>	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>U000000825549</b>
STREET ADDRESS	<b>NW 10 LOOP PO BOX 303</b>	STREET ADDRESS	<b>02/21/08-80014-016 61.25</b>
CITY-ST-ZIP	<b>GREENVILLE FL 32331</b>	CITY-ST-ZIP	
TITLE	<b>D</b> <input type="checkbox"/> Delete <b>SCOTT, ROY C</b>	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	<b>400 NW WHITLING DUCK TRAIL</b>	STREET ADDRESS	
CITY-ST-ZIP	<b>GREENVILLE FL 32331</b>	CITY-ST-ZIP	
TITLE	<b>D</b> <input type="checkbox"/> Delete <b>GINN, FRANCES C</b>	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	<b>RT. 3 BOX 31</b>	STREET ADDRESS	
CITY-ST-ZIP	<b>GREENVILLE FL 32331</b>	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Lawrence Day - LAWRENCE DAY 2-11-08