

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

**FILED**  
**Mar 04, 2008 8:00 am**  
**Secretary of State**

03-04-2008 90016 012 \*\*\*\*61.25

**DOCUMENT # N96000000636**

1. Entity Name

BLUE ANGEL BAPTIST CHURCH, INC.



Principal Place of Business

10900 HWY. 98 WEST  
PENSACOLA FL 32506

Mailing Address

10900 HWY. 98 WEST  
PENSACOLA FL 32506



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

59-3378142

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ARENBERG, JAMES D  
2013 CORAL STREET  
PENSACOLA FL 32506

Name

HALL, Woody

Street Address (P.O. Box Number is Not Acceptable)

10567 Fair Pine Dr.

City

PENSACOLA

FL

Zip Code

32506

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

*Woody Hall*

2/18/08

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when registering)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DC  
NAME HALL, WOODY E ☐ Delete  
STREET ADDRESS 10567 FAIR PINE DR  
CITY-STATE-ZIP PENSACOLA FL 32506

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE VCD  
NAME CARLISLE, NADINE ☐ Delete  
STREET ADDRESS 12220 WORTEL RD  
CITY-STATE-ZIP ELBERTA AL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE DT  
NAME GIAGG, JUNE ☐ Delete  
STREET ADDRESS 9237 COUNTRY RD 99  
CITY-STATE-ZIP LILLIAN AL

TITLE ☒ Change ☐ Addition  
NAME JUNE BRAGA  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE D  
NAME EDWARDS, FRAN ☐ Delete  
STREET ADDRESS 5221 FLAXMAN ST  
CITY-STATE-ZIP PENSACOLA FL 32506

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-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:

*Woody Hall*

2/18/08 830 982-8318