2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003895

FILED Feb 21, 2008 Secretary of State

Entity Name: FIRST BAPTIST CHURCH INC. SILVER SPRINGS FLORIDA

urrent P	rincipal Place	of Business:	New Principal Place	of Business:
	5TH ST. PRINGS, FL 34	488		
urrent Mailing Address:		s:	New Mailing Address:	
O BOX 3 LVER SI	98 PRINGS, FL 34	489		
I Number	: 59-3411364	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and Address of Current Registered Agent:		Name and Address of New Registered Agent:		
INITED				
11 NE 2	WAYNE OTH AVE L 34479 US			
511 NE 2 CALA, F ne above	0TH AVE L 34479 US	ubmits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,
511 NE 2 CALA, F ne above	OTH AVE L 34479 US named entity s e of Florida. RE:	,		
11 NE 2 CALA, F ne above the State	OTH AVE L 34479 US named entity s e of Florida. RE:	ubmits this statement for the p c Signature of Registered Age		d office or registered agent, or both, Date
511 NE 2 CALA, F ne above the State GNATUI	OTH AVE L 34479 US named entity s e of Florida. RE:	c Signature of Registered Age	ent	
511 NE 2 CALA, F ne above the State GNATUI	OTH AVE L 34479 US e named entity s e of Florida. RE: Electroni S AND DIRECT	c Signature of Registered Age F ORS: Delete E VE	ent	Date
11 NE 2 CALA, F e above the State GNATUI FFICER: e: me: dress:	e named entity se of Florida. RE: Electroni S AND DIRECT DP () HUNTER, WAYN 5511 NE 20TH A OCALA, FL 344	c Signature of Registered Age ORS: Delete E VE 79 Delete L AVE	ent ADDITIONS/CHANGI Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO

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: WAYNE HUNTER DP 02/21/2008