2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005757

Name:

Address:

City-St-Zip:

FOSTER, LYNN

3433 HIBISCUS

NAPLES, FL 34104

Entity Name: ESTATES BAPTIST CHURCH, INC.

FILED Jul 08, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 12285 COLLIER BLVD 2040 SANTA BARBARA BLVD NAPLES, FL 34116 NAPLES, FL 34113 **Current Mailing Address: New Mailing Address:** 3101 53ST SW 5450 STABLE WAY NAPLES, FL 34116 NAPLES, FL 34114 FEI Number: 30-0440829 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HAHE, JOSEPH F 310 17 STREET S.W. NAPLES, FL 34114 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete HAHE, JOSEPH F Name: Name: Address: 310 17TH ST SW Address: City-St-Zip: NAPLES, FL 34117 City-St-Zip: Title: () Delete Title: () Change () Addition RENNINGER, CHRISTIAN Name: Name: Address: 2797 46TH ST. SW Address: City-St-Zip: NAPLES, FL 34116 City-St-Zip: Title: () Delete Title: () Change () Addition HOLLAND, JOYCE Name: Name: 3101 53ST SW Address: Address: City-St-Zip: NAPLES, FL 34116 City-St-Zip: Title: TD () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JOSEPH HAHE PRES 07/08/2008