2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2007
Secretary of State

DOCUMENT# N97000006485

Entity Name: BURKETT CHAPEL PRIMITIVE BAPTIST CHURCH, INCORPORATED

Current Principal Place of Business:

415 3RD AVE
BARTOW, FL 33830

New Principal Place of Business:

Current Mailing Address:

415 3RD AVE
BARTOW, FL 33830

New Mailing Address:

FEI Number: 59-3409278 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MOORE, LAWRENCE W
415 3RD AVE
BARTOW, FL 33830 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:	PD	( ) Delete
Name:	MOORE, LAWRENCE W	
Address:	3383 TURNBERRY LANE	
City-St-Zip:	LAKELAND, FL 33803	
Title:	VD	( ) Delete
Name:	GREEN, ERNEST	
Address:	855 GOLFVIEW AVE	
City-St-Zip:	BARTOW, FL 33830	
Title:	VD	( ) Delete
Name:	SHOWERS, GERRY	
Address:	1335 VIRGINIA AVE S	
City-St-Zip:	BARTOW, FL 33830	
Title:	SD	( ) Delete
Name:	HARVEY-WOOTEN, LELA	
Address:	4040 RADFORD RD	
City-St-Zip:	BARTOW, FL 33830	
Title:	TD	( ) Delete
Name:	GHENT, JAMES	
Address:	920 CROWN AVE N	
City-St-Zip:	BARTOW, FL 33830	
Title:	D	( ) Delete
Name:	JONES, GEORGE	
Address:	410 3RD AVE S	
City-St-Zip:	BARTOW, FL 33830	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: LAWRENCE MOORE PD 04/13/2007

Electronic Signature of Signing Officer or Director — Date