## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # N98000002209**

1. Entity Name

THE GREENWOOD BAPTIST CHURCH, INCORPORATED



FILED Jan 31, 2007 08:00 AM Secretary of State

Principal Place of Business

4156 BRYAN ST GREENWOOD, FL 32443 Mailing Address

PO BOX 249

GREENWOOD, FL 32443 US

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## DO NOT WRITE IN THIS SPACE

01282007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 59-2248172 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GAMBILL, BRUCE 4156 BRYAN ST GREENWOOD, FL 32443

## DO NOT WRITE IN THIS SPACE

				IN THIS SPACE			
8. The above the obligati	named entity submits this statement for the joins of registered agent.	purpose of changing its registered	office or ri	egistered agent, or bo	oth, in the State of Florida. I am familiar w	vith, and accept	
SIGNATURE_	Signature, typed or printed name of registered agent and title	of applicable. (NOTE: Registered Ar	jent signatum	required when reinstating)	DATE		
:	Filing Fee is \$61.25 Due by May 1, 2007	Election Campaign Financin     Trust Fund Contribution.	ıg	\$5.00 May Be Added to Fees	100000612453 02/02/07-80106-021	61,25	
10.	OFFICERS AND DIREC	CTORS			<u> </u>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BANKS, MACK 4396 BRYAN ST GREENWOOD, FL 32443						
TITLE NAME	D DAVIS, HAROLD						
STREET ADDRESS CITY-ST-ZIP	P O BOX 273 N/A GREENWOOD, FL 32443						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DUNAWAY, KENNEDY 5675 NUBBIN RIDGE RD GREENWOOD, FL 32443		DO NOT WRITE				
ITTLE NAME STREET ADDRESS CITY-ST-ZIP	D MICKEL, WESLELY P O BOX 171 N/A GREENWOOD, FL 32443		IN THIS SPACE				
TITLE NAME STREET ADDRESS	T GAMBILL, BRUCE 5466 FORT ROAD					!	
CITY-ST-ZIP	GREENWOOD, FL 32443						
TITLE					•		

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shell 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 adolpsis, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

MANUE AND TYPE OF PROTECT HAVE OF SIGNED OF THE OF DIRECTOR

-28-0

850-482-9701