

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 06, 2008 08:00 A
Secretary of State

DOCUMENT # N98000002209

1. Entity Name
THE GREENWOOD BAPTIST CHURCH, INCORPORATED



Principal Place of Business
**4156 BRYAN ST
GREENWOOD, FL 32443**

Mailing Address
**PO BOX 249
GREENWOOD, FL 32443 US**



02022008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

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**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**D
BANKS, MACK
4396 BRYAN ST
GREENWOOD, FL 32443**

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**D
DAVIS, HAROLD
P O BOX 273 N/A
GREENWOOD, FL 32443**

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**D
DUNAWAY, KENNEDY
5675 NUBBIN RIDGE RD
GREENWOOD, FL 32443**

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**D
MICKEL, WESLEY
P O BOX 171 N/A
GREENWOOD, FL 32443**

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**T
GAMBILL, BRUCE
5466 FORT ROAD
GREENWOOD, FL 32443**

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

U00000817122
02/14/08-80080-025 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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 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: *Bruce Gambill* **BRUCE GAMBILL**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-3-08 850-482-9701

Date

Daytime Phone #