2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

May 05, 2006 8:00 am Secretary of State DOCUMENT # N99000004928 1. Entity Name 05-05-2006 90160 042 ****70.00 TRUSTEES, SPRINGFIELD BAPTIST CHURCH, INC. Principal Place of Business Mailing Address 3615 EAST THIRD STREET 3615 EAST THIRD STREET PANAMA CITY FL PANAMA CITY FL 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For 59-0976514 Not Applicable Zip Country Zip Country \$8.75 Additional þ 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LITTLE, JAMES W Street Address (P.O. Box Number is Not Acceptable) 2726 EAST 19TH COURT PANAMA CITY FL 32405-7202 City Zip Code 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 FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE ☐ Change Addition LITTLE, JAMES W NAME NAME STREET ADDRESS 2726 EAST 19TH COURT STREET ADDRESS PANAMA CITY FL 32405-7202 CITY - ST - Z/P CITY-ST-ZIP TITLE VT Detete TITLE Change ☐ Addition HARRELL, JAMES NAME NAME 5811 LAKE DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PANAMA CITY FL 32404 CITY-ST-ZIP Delete TITLE ☐ Addition ☐ Change NAME PROWN, CALVIN STREET ADDRESS 7234 CAMPFLOWERS RD STREET ADDRESS CITY-ST-ZIP YOUNGSTOWN FL 32466 CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition GLISSON, JAMES NAME NAME STREET ADDRESS 542 POWELL AVENUE STREET ADDRESS CITY-ST-ZIP PANAMA CITY FL 32404 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition STREET ADDRESS STREET ADDRESS CITY-\$1-ZIP CITY-ST-ZIP TITLE □ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

if changed, or on an attachment with an address, with all other like empowered. amer W. Little JAMES W. Little 26 ADR OG (850) 785-5241

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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

FILED