


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 02, 2007 8:00 am
Secretary of State

02-02-2007 90013 050 ****61.25

DOCUMENT # 745693 1. Entity Name WELAKA BAPTIST CHURCH, INC.	
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Principal Place of Business 670 3RD AVENUE WELAKA FL 32193	Mailing Address PO BOX 100 WELAKA FL 32193
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1st MOORE CR2E037 (10/06)


2. Principal Place of Business - No P.O. Box # Same as above	3. Mailing Address Same as above
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip Country Putnam	Zip Country Putnam

4. FEI Number 05-0020900	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent CLAY, DALLAS 195 LAKE CAMO DRIVE [DELETE] POMONA PARK FL 32181	7. Name and Address of New Registered Agent Name William E. Williams Street Address (P.O. Box Number is Not Acceptable) 413 Melrose Ave. City Green Cove, FL Zip Code 32043
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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.

William E. Williams, Pastor

SIGNATURE:  (NOTE: Registered Agent signature required when reinstating) **January 23rd, 2007**

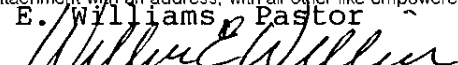
FILE NOW: FEE IS \$61.25 Due By May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE	T <input type="checkbox"/> Delete NAME: BASFORD, SHIRLEY STREET ADDRESS: PO BOX 42 CITY-ST-ZIP: WELAKA FL
TITLE	AC <input type="checkbox"/> Delete NAME: WEBB, MARY STREET ADDRESS: 370 COUNTY RD 309, SATAUM, FL, PO BOX 1173 CITY-ST-ZIP: WELAKA FL 32193
TITLE	TR <input type="checkbox"/> Delete NAME: FORSYTHE, QUEENIE STREET ADDRESS: 206 ZEAGLER DR., APT 62 CITY-ST-ZIP: PALATKA FL 32177
TITLE	TD <input type="checkbox"/> Delete NAME: BASFORD, BOBBY STREET ADDRESS: 500 WALNUT ST CITY-ST-ZIP: WELAKA FL 32193
TITLE	<input type="checkbox"/> Delete
TITLE	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	Pastor <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition NAME: William E. Williams STREET ADDRESS: 413 Melrose Ave. CITY-ST-ZIP: Green Cove, Fla. 32043
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 if changed, or on an attachment with an address, with all other like empowered.

William E. Williams, Pastor **JANUARY 23, 2007**

SIGNATURE:  Date _____ Daytime Phone # _____