

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 02, 2007**  
**Secretary of State**

DOCUMENT# 727864

Entity Name: FAITH BAPTIST CHURCH, INC. OF MARIANNA

**Current Principal Place of Business:**

2494 HWY 71 S  
MARIANNA, FL 62244-253 US

**New Principal Place of Business:**

2494 HWY 71 S  
MARIANNA, FL 32448 US

**Current Mailing Address:**

2494 HWY 71 S  
MARIANNA, FL 62244-253 US

**New Mailing Address:**

2494 HWY 71 S  
MARIANNA, FL 32448 US

FEI Number: 33-1136254      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

SANDERS, TIMOTHY N  
2345 SAPP RD  
COTTONDALE, FL 32431 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: T ( ) Delete  
Name: OXENDINE, GARY U  
Address: 3193 ADAMS ST.  
City-St-Zip: COTTONDALE, FL 32431 US

Title: PD ( ) Delete  
Name: SANDERS, TIMOTHY  
Address: 2345 SAPP ROAD  
City-St-Zip: COTTONDALE, FL 32431

Title: T ( ) Delete  
Name: SAPP, DALLAS  
Address: 3888 WHISPERING PINES  
City-St-Zip: GREENWOOD, FL 32443

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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 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: TIMOTHY SANDERS

PD

05/02/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date