2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

SIGNATURE:

May 14, 2008 8:00 am Secretary of State DOCUMENT # N10516 1. Entity Name 05-14-2008 90021 020 ****61.25 FAITH BIBLE BAPTIST CHURCH INC. Principal Place of Business Mailing Address PO BOX 678 PO BOX 678 P.C. BOX 678 CENTURY FL 32535 P.O. BOX 678 CENTURY FL 32535 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/07) City & State City & State 4. FEI Number Applied For 63-6104252 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BARROW, ROBERT K. BARROW, ROBERT K 2141 WEST HWY. 4 Street Address (P.O. Box Number is Not Acceptable) (PO BOX 678) 6840 BRATT RD. CENTURY FL'32535 Zip Code 3 2 5 3 5 ENTURY 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 (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to 9. Election Campaign Financing Due By May 1, 2008 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. PASTOR/ PRESIDENT BARROW, ROBERT K. TITLE - □ Delete TITLE BONDURANT, JEREMY NAME NAME 5346 JOHN LOWERY RD. 6840 BRATT RD. STREET ADDRESS STREET ADDRESS JAY FL 32565 CITY-ST-ZIP CITY-ST-ZIP CENTURY FL 32535 TITLE Delete Change ■ Addition GODWIN, MARCUS NAME NAME 111 COX RD. STREET ADDRESS STREET ADDRESS MC DAVID FL 32568 CITY-ST-ZIP CITY-ST-ZIP · .~.... HILE L Delete TITÉE ∐ Change I Addition NAME THOMPSON, CLIFF HAME 760 BRIGGS BLVD STREET ADDRESS STREET ADDRESS CENTURY FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TILE ☐ Change ☐ Addition THOMPSON, COLLIN NAME 206 CHURCH STREET STREET ADDRESS STREET ADDRESS FLOMATON AL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition HUTTO, MIKE NAME LAME 208 MARY STREET STREET ADDRESS STREET ADDRESS **JAY FL 32565** CITY-ST-ZIP CITY-ST-7/P TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.

FILED

3-30-08