

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001592

FILED
May 27, 2009
Secretary of State

Entity Name: MISSION BAPTIST CHURCH OF LAKE WALES, INC.

Current Principal Place of Business:

107 CRYSTAL AVE
LAKE WALES, FL 33853

New Principal Place of Business:

Current Mailing Address:

PO BOX 7501
WINTER HAVEN, FL 33883

New Mailing Address:

FEI Number: 51-0538305 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:

MARDY, DENIS
270 18TH STREET NE
WINTER HAVEN, FL 33881 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: PV () Delete
Name: MARDY, DENIS
Address: 6042 W. LAKE RUTH DR
City-St-Zip: DUNDEE, FL 33883

Title: S () Delete
Name: DUCLOS, BERNARD C
Address: 437 STERLING DR
City-St-Zip: WINTER HAVEN, FL 33884

Title: VS () Delete
Name: ROMULUS, REGINOLD
Address: 1437 LAKE VIEW DR
City-St-Zip: LAKE WALES, FL 33859

Title: T () Delete
Name: ALCIME, LUMAGE
Address: 113 STUART AVE
City-St-Zip: LAKE WALES, FL 33859

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: DENIS MARDY

PV

05/27/2009

Electronic Signature of Signing Officer or Director

_____ Date