

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19012

FILED
Apr 19, 2009
Secretary of State

Entity Name: ORSINO BAPTIST CHURCH OF MERRITT ISLAND, INC.

Current Principal Place of Business:

4505 N.COURTENAY PKWY.
MERRITT ISLAND, FL 32953

New Principal Place of Business:

Current Mailing Address:

POB 540846
MERRITT ISLAND, FL 329540826

New Mailing Address:

FEI Number: 59-2771965 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WATSON, BRUCE
1380 COX RD.
COCOA, FL 32926 US

Name and Address of New Registered Agent:

WATSON, RUBY
1380 COX RD.
COCOA, FL 32926 US

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: RUBY WATSON

04/19/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TR () Delete
Name: WHITFIELD, GEORGE
Address: 177 BLUE JAY LANE
City-St-Zip: MERRITT ISLAND, FL 32953

Title: PTR () Delete
Name: WATSON, BRUCE
Address: 1440 COX ROAD
City-St-Zip: COCOA, FL 32926

Title: TR () Delete
Name: PHELPS, CARL
Address: 474 ORANGE AVE
City-St-Zip: MERRITT ISLAND, FL 32952

Title: VTR () Delete
Name: MARTIN, JEFFREY
Address: 1915 TEMPLE AVE.
City-St-Zip: MERRITT ISLAND, FL 32953

Title: TR () Delete
Name: MARTIN, ROBERT K
Address: 5410 QUAIL HOLLOW DR
City-St-Zip: MERRITT ISLAND, FL

Title: TR () Delete
Name: PICKEL, MARTHA
Address: 205 PALMETTO AVE
City-St-Zip: MERRITT ISLAND, FL 32953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PTR (X) Change () Addition
Name: WATSON, RUBY
Address: 1440 COX ROAD
City-St-Zip: COCOA, FL 32926

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: RUBY WATSON

PRES

04/19/2009

Electronic Signature of Signing Officer or Director

Date