

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19012

FILED  
Mar 21, 2010  
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, RUBY  
1380 COX RD.  
COCOA, FL 32926 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: TR  
Name: WHITFIELD, GEORGE  
Address: 177 BLUE JAY LANE  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: PTR  
Name: WATSON, RUBY  
Address: 1440 COX ROAD  
City-St-Zip: COCOA, FL 32926

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

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

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

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

I hereby 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 all other like empowered.

SIGNATURE: RUBY WATSON

PRES

03/21/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date