

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41914

FILED  
Jan 10, 2011  
Secretary of State

**Entity Name:** CLERMONT FIRST BAPTIST WEE CENTER, INC.

**Current Principal Place of Business:**

498 W. MONTROSE ST.  
CLERMONT, FL 34711

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 121151  
CLERMONT, FL 347121151 US

**New Mailing Address:**

**FEI Number:** 59-3049182

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CALDWELL, ROY  
608 S, MAIN AVE  
APT. 28  
MINNEOLA, FL 34715 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: C  
Name: BLACKBURN, JEANETTE  
Address: 5836 MARVINS PLACE  
City-St-Zip: GROVELAND, FL 34736

Title: CC  
Name: BLACKBURN, SANDRA  
Address: 5836 MARVINS PLACE  
City-St-Zip: GROVELAND, FL 34736

Title: S  
Name: WILKINS, TOM  
Address: 10925 VERSAILLES BLVD  
City-St-Zip: CLERMONT, FL 34711

Title: T  
Name: DICKSON, KRYS  
Address: 1875 SETTLE ST  
City-St-Zip: CLERMONT, FL 34711

Title: D  
Name: KUYKENDALL, BECKY  
Address: 1533 SARUS AVE  
City-St-Zip: GROVELAND, FL 34736

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: BECKY KUYKENDALL

D

01/10/2011

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

\_\_\_\_\_  
Date