2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# N96000002234

Entity Name: PLEASANT GROVE MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business:

11712 COUNTY ROAD 239
OXFORD, FL 34484

New Principal Place of Business:

Current Mailing Address:

11712 COUNTY ROAD 239
OXFORD, FL 34484

New Mailing Address:

FEI Number: 59-2246795 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PURCELL, JERRY
10873 CR 475 NORTH
OXFORD, FL 34484 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: T ( ) Delete
Name: MARTIN, CRAIG
Address: 11712 CR 239
City-St-Zip: OXFORD, FL 34484

Title: T ( ) Delete
Name: BROWN, CHRIS
Address: 5107 CR 163
City-St-Zip: WILDWOOD, FL 34785

Title: T ( ) Delete
Name: MARTIN, DARREL
Address: 11712 COUNTY ROAD 239
City-St-Zip: OXFORD, FL 34484

Title: PD ( ) Delete
Name: HUBBARD, JIM
Address: 11712 CR 239
City-St-Zip: OXFORD, FL 34484

Title: T ( ) Delete
Name: SMITH, GWEN N
Address: 1591 EAST C 466
City-St-Zip: OXFORD, FL 34484

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:

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: GWEN N SMITH T 04/28/2009

Electronic Signature of Signing Officer or Director — Date