## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F94000005377

TED PARTIES PRESS INC

FILED Feb 25, 2009 Secretary of State

Entity Name: ASSOCIATED BAPTIST PRESS, INC.

**Current Principal Place of Business: New Principal Place of Business:** 11905 LORETTO SQUARE DRIVE 8902 ELIZABETH FALLS DRIVE JACKSONVILLE, FL 32223 JACKSONVILLE, FL 32257 **Current Mailing Address: New Mailing Address:** P.O.BOX 23769 JACKSONVILLE, FL 32241 US FEI Number: 58-1930302 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WARNER, GREGORY D LINDSAY, BERGSTROM R 11905 LORETTO SQUARE DRIVE 8902 ELIZABETH FALLS DRIVE JACKSONVILLE, FL 32257 JACKSONVILLE, FL 32257 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: LINDSAY R. BERGSTROM 02/25/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition STEPHENSON, BOB Name: Name: 1518 BROOKHAVEN BOULEVARD Address: Address: City-St-Zip: NORMAN, OK 73072 City-St-Zip: Title: MD Title: () Delete () Change () Addition KNOX, MARV Name: Name: Address: 975 PELICAN LANE Address: City-St-Zip: COPPELL, TX 75019 City-St-Zip: Title: () Delete Title: () Change () Addition LATTIMORE, DAN Name: Name: 307 COLBERT STREET, EAST Address: Address: City-St-Zip: COLLIERVILLE, TN 38017 City-St-Zip: Title: MD ( ) Delete Title: () Change () Addition Name: NICKELL, JIMMY Name: 11100 WEST 120TH STREET Address: Address: City-St-Zip: OVERLAND PARK, KS 62213 City-St-Zip: Title: ( ) Delete Title: () Change () Addition DAN, HOBBS Name: Name: 2533 BEAURUE ROAD Address: Address: City-St-Zip: NORMAN, OK 73069 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition WARNER, GREGORY D WILKINSON, DAVID R Name: Name: Address: 11905 LORETTO SQUARE DRIVE Address: 3116 MAPLE AVENUE

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.

City-St-Zip:

WACO, TX 76707

SIGNATURE: DAVID R. WILKINSON CEO 02/25/2009

JACKSONVILLE, FL 32223

City-St-Zip: