2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2009
Secretary of State

DOCUMENT# 711454

Entity Name: CORNERSTONE BAPTIST CHURCH OF PENSACOLA, INC.

Current Principal Place of Business:

5454 MOBILE HWY.
PENSACOLA, FL 32526

New Principal Place of Business:

Current Mailing Address:

5454 MOBILE HWY.
PENSACOLA, FL 32526

New Mailing Address:

FEI Number: 59-1222322 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, BOBBY LEE
2681 TINOSA LANE
PENSACOLA, FL 32526 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:	DT	( ) Delete
Name:	PHELPS, BILL	
Address:	255 AQUAMARINE AVE	
City-St-Zip:	PENSACOLA, FL 32505	
Title:	DT	( ) Delete
Name:	CROSBY, GARY H	
Address:	4712 CLARA ST	
City-St-Zip:	PENSACOLA, FL 32526	
Title:	DT	( ) Delete
Name:	PADGETT, BUDDY	
Address:	706 EDISON DR.	
City-St-Zip:	PENSACOLA, FL 32505	
Title:	P	( ) Delete
Name:	SMITH, BOBBY LEE,	
Address:	2681 TINOSA LANE	
City-St-Zip:	PENSACOLA, FL	
Title:	S/T	( ) Delete
Name:	CROSBY, DANALEEN	
Address:	4712 CLARA ST	
City-St-Zip:	PENSACOLA, FL 32526	
Title:	DT	( ) Delete
Name:	ZIEGLER, RON	
Address:	1496 WATER OAK TRAIL	
City-St-Zip:	CANTONMENT, FL 32533	

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:	DT	(X) Change ( ) Addition
Name:	SMITH, DICKIE	
Address:	3105 CHRISANDRA CT.	
City-St-Zip:	PENSACOLA, FL 32526	
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: BOBBY LEE SMITH P 03/12/2009

Electronic Signature of Signing Officer or Director — Date