## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 701029**

FILED Mar 16, 2009 Secretary of State

Entity Name: FIRST BAPTIST CHURCH, FORT MYERS, FLORIDA, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1735 JACKSON 1735 JACKSON ST FORT MYERS, FL 33901 FORT MYERS, FL 33901 **Current Mailing Address: New Mailing Address:** 1735 JACKSON PO BOX 780 FORT MYERS, FL 33901 FORT MYERS, FL 33902 FEI Number: 59-0799901 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: ANDERSON, ROBERT 61 PALM TRÉE LANE FORT MYERS, FL 33905 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete FRIERSON, ALBERT M., FRIERSON, ALBERT M Name: Name: Address: 13801 EAGLES RIDGE LAKES DR #202 Address: 13801 EAGLES RIDGE LAKES DR #202 City-St-Zip: FORT MYERS, FL 33912 City-St-Zip: FORT MYERS, FL 33912 Title: ( ) Delete Title: () Change () Addition Name: EGOLF, ROBERT Name: Address: 19 EVERGREEN DR., SWAN LAKE Address: City-St-Zip: FORT MYERS, FL 33917 City-St-Zip: Title: VD. () Delete Title: () Change () Addition MILLER, WAYNE T Name: Name: 1299 PLUMOSA DRIVE Address: Address: City-St-Zip: FORT MYERS, FL 33901 City-St-Zip: Title: SD ( ) Delete Title: () Change () Addition Name: ANDERSON, ROBERT DR Name: Address: 61 PALM TREE LANE Address: City-St-Zip: FT MYERS, FL 33905 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: ALBERT M FRIERSON P 03/16/2009