## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 701117** 

Apr 22, 2009 Secretary of State

Entity Name: EAST BRENT BAPTIST CHURCH, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

4801 NORTH DAVIS HIGHWAY PENSACOLA, FL 32503

**Current Mailing Address: New Mailing Address:** 

4801 NORTH DAVIS HIGHWAY PENSACOLA, FL 32503

FEI Number: 59-1159490 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:

PATTERSON, DR A DALE 4801 NO DAVIS HIGHWAY PENSACOLA, FL 32503

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:

City-St-Zip:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

CANTONMENT, FL 32533

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

CANTONMENT, FL 32533 US

VPD () Delete (X) Change ( ) Addition COOEY, DALE COOEY, DALE Name: Name:

3022 RAINES ST Address: 3022 RAINES ST Address: City-St-Zip: PENSACOLA, FL 32514 City-St-Zip: PENSACOLA, FL 32514 US

Title: PD () Delete Title: (X) Change ( ) Addition SMITH, DONALD Name: SMITH, DONALD Name:

Address: 3112 BRITTANY TERRACE Address: 3112 BRITTANY TERRACE City-St-Zip: PENSACOLA, FL 325044966 City-St-Zip: PENSACOLA, FL 325044966 US

Title: () Delete Title: (X) Change ( ) Addition PATTERSON, DALE PATTERSON, DALE Name: Name:

9625 PICKWOOD DR. Address: Address: 9625 PICKWOOD DR. City-St-Zip: PENSACOLA, FL 32514 City-St-Zip: PENSACOLA, FL 32514 US

Title: ( ) Delete Title: BA (X) Change ( ) Addition BA

Name: MCALLISTER, JOHN T Name: MCALLISTER, JOHN T Address: 7420 DANNY WAY Address: 7420 DANNY WAY City-St-Zip: PENSACOLA, FL 32526 City-St-Zip: PENSACOLA, FL 32526 US

Title: () Delete Title: (X) Change ( ) Addition STAFFORD, TODD STAFFORD, TODD Name: Name: 915 BRANDERMILL DRIVE 915 BRANDERMILL DRIVE Address: Address:

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:

SIGNATURE: JOHN T. MCALLISTER BA 04/22/2009