

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 03, 2009
Secretary of State**

DOCUMENT# 701593

Entity Name: BELFORT ROAD BAPTIST CHURCH, INC.

Current Principal Place of Business:

2950 BELFORT ROAD
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 47275
JACKSONVILLE, FL 32247275

New Mailing Address:

FEI Number: 59-2925841 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLAZS, JULIUS J
6098 WAKULLA SPRINGS RD
JACKSONVILLE, FL 32258 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: P () Delete
Name: BLAZS, JULIUS J
Address: 6098 WAKULLA SPRINGS RD
City-St-Zip: JACKSONVILLE, FL 32258

Title: D () Delete
Name: BLAZS, JEANNIE W
Address: 6098 WAKULLA SPRINGS RD
City-St-Zip: JACKSONVILLE, FL 32258

Title: D () Delete
Name: MAXWELL, FRED,
Address: 1830 DEWEY PLACE
City-St-Zip: JACKSONVILLE, FL 32207

Title: T () Delete
Name: HILL, ROBERT E
Address: 5448 LORI DR SOUTH
City-St-Zip: JACKSONVILLE, FL 32207

Title: D () Delete
Name: HILL, BETTY
Address: 5448 LORI DR.
City-St-Zip: JACKSONVILLE, FL 32207

Title: D () Delete
Name: MAXWELL, MILDRED
Address: 1830 DEWEY PLACE
City-St-Zip: JACKSONVILLE, FL 32207

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:

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: JULIUS J. BLAZS

Electronic Signature of Signing Officer or Director

REV.

02/03/2009

_____ Date