

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 701708

FILED
Oct 12, 2009
Secretary of State

Entity Name: THE FIRST BAPTIST CHURCH OF BUSHNELL INC.

Current Principal Place of Business:

125 W ANDERSON AVE
BUSHNELL, FL 33513

New Principal Place of Business:

Current Mailing Address:

125 W ANDERSON AVE
BUSHNELL, FL 33513

New Mailing Address:

FEI Number: 59-1089791 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

TODD, CAROLYN
7979 CR 747
BUSHNELL, FL 33513 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: CAROLYN TODD

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TODD, MARVIS C
Address: 7979 CR 747
City-St-Zip: BUSHNELL, FL 33513

Title: D () Delete
Name: REID, JOHN
Address: POB 2370
City-St-Zip: BUSHNELL, FL 33513

Title: D () Delete
Name: HAWKINS, R. LEE JR
Address: POB 893
City-St-Zip: BUSHNELL, FL 33513

Title: D () Delete
Name: BILL, MACMILLAN
Address: 9417 CR 657
City-St-Zip: BUSHNELL, FL 33513

Title: D () Delete
Name: CRAWFORD, M. LYNN
Address: 7131 CR 619
City-St-Zip: BUSHNELL, FL 33513

Title: T () Delete
Name: MADDOX, LORI
Address: 401 JUMPER DRIVE SOUTH
City-St-Zip: BUSHNELL, FL 33513

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: T (X) Change () Addition
Name: LACKAY, JESSICA
Address: 65 CR 532
City-St-Zip: BUSHNELL, FL 33513

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: SARAH DOYLE

OM

10/12/2009

Electronic Signature of Signing Officer or Director

Date