

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jun 16, 2009  
Secretary of State**

DOCUMENT# 701933

Entity Name: FIRST BAPTIST CHURCH OF DESTIN FLORIDA INC.

**Current Principal Place of Business:**

201 BEACH DRIVE  
DESTIN, FL 32541

**New Principal Place of Business:**

**Current Mailing Address:**

201 BEACH DRIVE  
DESTIN, FL 32540 US

**New Mailing Address:**

FEI Number: 59-2352093      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:**

PARIS, ALBERT  
18374 HWY 331 S  
RT 2 BOX 101  
FREEPORT, FL 32439 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: PD ( ) Delete  
Name: PARIS, ALBERT  
Address: RT 2 BOX 101  
City-St-Zip: FREEPORT, FL 32439

Title: TD ( ) Delete  
Name: READY, FRANK  
Address: 516 KELLY ST.  
City-St-Zip: DESTIN, FL 32541

Title: T ( ) Delete  
Name: ANDERSON, JOHN  
Address: 743 BAYOU DR  
City-St-Zip: DESTIN, FL 32541

**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:

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 PARIS

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

06/16/2009

\_\_\_\_\_  
Date