

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702046

FILED  
Mar 26, 2009  
Secretary of State

**Entity Name:** THE FIRST BAPTIST CHURCH OF INDIAN RIVER CITY, INC.

**Current Principal Place of Business:**

360 KNOX MCRAE DRIVE  
360 KNOX MCRAE DRIVE  
BREVARD, FL 32780 US

**New Principal Place of Business:**

360 KNOX MCRAE DRIVE  
TITUSVILLE, FL 32780 US

**Current Mailing Address:**

360 KNOX MCRAE DRIVE  
360 KNOX MCRAE DRIVE  
BREVARD, FL 32780 US

**New Mailing Address:**

360 KNOX MCRAE DRIVE  
TITUSVILLE, FL 32780 US

**FEI Number:** 59-1864853

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROGERS, RICHARD L.  
1135 S. WASHINGTON  
TITUSVILLE, FL 32780 US

**Name and Address of New Registered Agent:**

ROGERS, RICHARD L.  
1135 S. WASHINGTON  
TITUSVILLE, FL 32780 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:

03/26/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: JOHNSON, DARIS,  
Address: 335 WILLOW ST.  
City-St-Zip: TITUSVILLE, FL 32780 US

Title: D ( ) Delete  
Name: MERRITT, ALVIN O,  
Address: 4495 GRAY AVE  
City-St-Zip: TITUSVILLE, FL 32780 US

Title: D ( ) Delete  
Name: MCAULIFFE, JACK  
Address: 4860 CATHEDRAL WAY  
City-St-Zip: TITUSVILLE, FL 32780 US

Title: T ( ) Delete  
Name: WILLIAM LAWSON,  
Address: 5531 CINNAMON FERN BLVD  
City-St-Zip: COCOA, FL 32927 US

**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:

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: WILLIAM LAWSON

T

03/26/2009

Electronic Signature of Signing Officer or Director

Date