

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702447

FILED
Mar 03, 2009
Secretary of State

Entity Name: TRUSTEE CORPORATION OF THE KING STREET BAPTIST CHURCH, INC.

Current Principal Place of Business:

BAPTIST CHURCH INC
1040 WEST KING STREET
COCOA, FL 32922

New Principal Place of Business:

Current Mailing Address:

BAPTIST CHURCH INC
1040 WEST KING STREET
COCOA, FL 32922

New Mailing Address:

FEI Number: 05-0026778 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MALLARD, ARNOLD
3930 FENNER ROAD
COCOA, FL 329264206 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: VD () Delete
Name: PARRISH, CRAIG
Address: 1850 BRITT ROAD
City-St-Zip: COCOA, FL 32926

Title: D () Delete
Name: HURST, DONALD
Address: 2100 COX ROAD
City-St-Zip: COCOA, FL 32926

Title: D () Delete
Name: MALONE, DAVID
Address: 104 GRACE AVE
City-St-Zip: COCOA, FL 329264225

Title: DST () Delete
Name: SMITH, RAYVENA
Address: 4600 JANET RD
City-St-Zip: COCOA, FL 329264225

Title: T () Delete
Name: PARRISH, TERESA
Address: 1850 BRITT ROAD
City-St-Zip: COCOA, FL 32926

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:

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: ARNOLD MALLARD

RA

03/03/2009

Electronic Signature of Signing Officer or Director

Date