2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2009
Secretary of State

DOCUMENT# 702450

Entity Name: CENTRAL BAPTIST CHURCH INC

Current Principal Place of Business:

4235 MT. STERLING AVE.
TITUSVILLE, FL 32780

New Principal Place of Business:

Current Mailing Address:

4235 MT. STERLING AVE.
TITUSVILLE, FL 32780

New Mailing Address:

FEI Number: 59-1382766 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COX, DAVID J
4235 MT. STERLING AVE
TITUSVILLE, FL 32780 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:	COX, DAVID J	
Address:	4255 MT STERLING AVE	
City-St-Zip:	TITUSVILLE, FL 32780	
Title:	VPD	( ) Delete
Name:	SHAFFER, RUSSELL	
Address:	4235 MT. STERLING AVENUE	
City-St-Zip:	TITUSVILLE, FL 32780	
Title:	ST	( ) Delete
Name:	SUMNER, LLOYD	
Address:	480 RANEY RD	
City-St-Zip:	TITUSVILLE, FL 32780	
Title:	O	( ) Delete
Name:	MURROW, HUGH	
Address:	3342 SW HOGANNAH LANE	
City-St-Zip:	OKEECHOBEE, FL 34974	
Title:	O	( ) Delete
Name:	VITEILARO, JACK	
Address:	4235 MT STULAND AVE	
City-St-Zip:	TITUSVILLE, FL 32780	

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: DAVID COX PD 01/06/2009
Electronic Signature of Signing Officer or Director — Date