2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704397

FILED Mar 23, 2009 Secretary of State

Entity Name: HILLCREST BAPTIST CHURCH OF PENSACOLA, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	NE MILE RD. DLA, FL 32514				
Current Mailing Address:			New Mailing Address:		
	NE MILE RD. DLA, FL 32514				
FEI Number	: 59-0941381	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
1307 CRE PENSACC	I,GERALD EK BRIDGE RO DLA, FL 32514	US	nurnoso of changing its register.	ad office or registered agent, or both	
	e named entity s e of Florida.	submits this statement for the	purpose of changing its register	ed office or registered agent, or both,	
SIGNATU	DE:				
	⊼ ⊑.				
01011/110		ic Signature of Registered Ag	ent	Date	
				Date BES TO OFFICERS AND DIRECTORS:	
	Electron	TORS: Delete ND, FLOYD ELAND LANE			
OFFICER Title: Name: Address:	Electron S AND DIRECT TR () WESTMORELA 808 WESTMOR CANTONMENT,	TORS: Delete ND, FLOYD ELAND LANE FL 32533 Delete EALD RIDGE ROAD	ADDITIONS/CHANG Title: Name: Address:	SES TO OFFICERS AND DIRECTORS:	
OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	Electron S AND DIREC TR () WESTMORELA 808 WESTMOR CANTONMENT, TR () NEWMAN, GER 1307 CREEK BI PENSACOLA, F	Delete ND, FLOYD ELAND LANE FL 32533 Delete ALD RIDGE ROAD EL 32514 Delete (OD DRIVE	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	SES TO OFFICERS AND DIRECTORS: () Change () Addition	

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: KAREN STARK/DIRECTOR OF FINANCE/ACCOUNTING DIRE 03/23/2009