

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704658

FILED
Jan 26, 2009
Secretary of State

Entity Name: OAK PARK BAPTIST CHURCH, INC.

Current Principal Place of Business:

4610 SW ARCHER ROAD
GAINESVILLE, FL 32608

New Principal Place of Business:

Current Mailing Address:

4610 SW ARCHER ROAD
GAINESVILLE, FL 32608

New Mailing Address:

FEI Number: 59-1554589

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JENKINS, ELIJAH J.
ROUTE 2, BOX 176
MICANOPY, FL 32667 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: JENKINS, ELIJAH J.,
Address: ROUTE 2, BOX 176
City-St-Zip: MICANOPY, FL 32667

Title: SD () Delete
Name: WHITE, JOYCE J,
Address: 4715 NW 40TH ST
City-St-Zip: GAINESVILLE, FL 32606

Title: TD () Delete
Name: BOALS, MARJORIE,
Address: 8118 SW 98TH AVE
City-St-Zip: GAINESVILLE, FL 32608

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: MARJORIE BOALS

TD

01/26/2009

Electronic Signature of Signing Officer or Director

Date