2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704679

FILED Jan 22, 2009 Secretary of State

Entity Name: FLORIDA BAPTIST CHILDREN'S HOMES, INC.

Current Principal Place of Business: New Principal Place of Business:

1015 SIKES BLVD LAKELAND, FL 33815

Current Mailing Address: New Mailing Address:

PO BOX 8190

LAKELAND, FL 33802 US

FEI Number: 59-0657326 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

HAAG, JERRY DR. 1015 ŚIKES BLVD.

LAKELAND, FL 33815 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:

City-St-Zip:

City-St-Zip:

City-St-Zip:

City-St-Zip:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

LAKELAND, FL 33815

LAKELAND, FL 33815

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

LAKELAND, FL 33815

(X) Change () Addition () Delete MUSSELWHITE, BOBBY MUSSELWHITE, BOBBY Name: Name: 1015 SIKES BLVD Address: 1015 SIKES BLVD Address:

City-St-Zip: LAKELAND, FL 33815 City-St-Zip: LAKELAND, FL 33815

Title: VCT Title: (X) Change () Addition () Delete BROADWELL, BOB Name: WHITMAN, DON Name: Address: 1015 SIKES BLVD Address: 1015 SIKES BLVD

() Change () Addition

Title: VCT () Delete Title: DAY, BEVERLY Name: Name: Address: 1015 SIKES BLVD Address:

Title: VΡ () Delete Title: (X) Change () Addition

JOHNSTON, STEVEN P Name: Name: HAAG, JERRY DR 1015 SIKES BLVD. 1015 SIKES BLVD. Address: Address: City-St-Zip: LAKELAND, FL 33815 City-St-Zip: LAKELAND, FL 33815

Title: () Delete Title: (X) Change () Addition

HAAG, JERRY DR. JOHNSTON, STEVE Name: Name: 1015 SIKES BLVD. 1015 SIKES BLVD. Address: Address: LAKELAND, FL 33815 City-St-Zip: City-St-Zip: LAKELAND, FL 33815

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: STEVE JOHNSTON **VP** 01/22/2009