

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705084

FILED  
Apr 16, 2009  
Secretary of State

**Entity Name:** SOUTHWOOD BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

5177 CAPITAL CIRCLE S.W.  
TALLAHASSEE, FL 32305

**New Principal Place of Business:**

**Current Mailing Address:**

5177 CAPITAL CIRCLE S.W.  
TALLAHASSEE, FL 32305

**New Mailing Address:**

**FEI Number:** 59-1505766

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CAIN, RONALD J  
5083 LOVINIA DRIVE  
TALLAHASSEE, FL 32311 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: PTR ( ) Delete  
Name: RAMSEY, HAROLD F  
Address: 8737 OPAL DRIVE  
City-St-Zip: TALLAHASSEE, FL 32309

Title: TTR ( ) Delete  
Name: CAIN, RONALD J  
Address: 5083 LOVINIA DRIVE  
City-St-Zip: TALLAHASSEE, FL 32311

Title: STR ( ) Delete  
Name: GANTT, DAVID  
Address: P. O. BOX 6503  
City-St-Zip: TALLAHASSEE, FL 32314

Title: DECO ( ) Delete  
Name: WOODROW, WALKER W  
Address: 112 MAGG SHEVELLE ROAD  
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: TRUS ( ) Delete  
Name: MELIN, ROBERT  
Address: 11363 GRANNY LANE  
City-St-Zip: TALLAHASSEE, FL 32305

**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: TRUS (X) Change ( ) Addition  
Name: JONES, DERRELL  
Address: 2001 MARISE STREET  
City-St-Zip: TALLAHASSEE, FL 32310

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: RONALD J. CAIN

TTR

04/16/2009

Electronic Signature of Signing Officer or Director

Date