2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705121

FILED Feb 18, 2009 Secretary of State

Entity Name: THE FIRST BAPTIST CHURCH OF LORIDA, INC.

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

1927 BLESSINGS AVE LORIDA, FL 33857 US

Current Mailing Address: New Mailing Address:

P.O. BOX 267

LORIDA, FL 33857 US

FEI Number: 59-2123643 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BOOHER, JONATHAN D REV 1927 BLESSINGS AVE LORIDA, FL 33857 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:

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Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: MCKNIGHT, TOM Name: BOONE, MERLE

 Address:
 6117 BAY LANE
 Address:
 964 CR 721, LOT 51

 City-St-Zip:
 SEBRING, FL 338760401
 City-St-Zip:
 LORIDA, FL 33857 US

Title: TD () Delete Title: TD (X) Change () Addition Name: FERGUSON, DELLA Name: FERGUSON, DELLA

 Address:
 449 BLACK BASS PT
 Address:
 449 BLACK BASS PT

 City-St-Zip:
 LORIDA, FL 33857
 City-St-Zip:
 LORIDA, FL 33857 US

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

Name: CALHOUN, JIM Name: HOPE, GEORGE

Address: 231 HICKORY RIDGE DR Address: PO BOX 227, 1511 LAKESHORE DRIVE

City-St-Zip: SEBRING, FL 33876 City-St-Zip: LORIDA, FL 33857 US

Title: SD () Delete Title: () Change () Addition

 Name:
 MCCLELLAND, RUTH
 Name:

 Address:
 1024 DENISE AVENUE
 Address:

 City-St-Zip:
 SEBRING, FL
 City-St-Zip:

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

 Name:
 CRIBBS, TOBY
 Name:
 CRIBBS, TOBY

 Address:
 1603 EVANGELINE AVE
 Address:
 216 DUANE PALMER

 City-St-Zip:
 SEBRING, FL 33870
 City-St-Zip:
 SEBRING, FL 33876 US

Title: MD () Delete Title: () Change () Addition

 Name:
 BOOHER, JONATHAN D
 Name:

 Address:
 1927 BLESSINGS AVE
 Address:

 City-St-Zip:
 LORIDA, FL 33857
 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: JONATHAN D. BOOHER REV. 02/18/2009