

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706353

FILED
Feb 12, 2009
Secretary of State

Entity Name: FIRST BAPTIST CHURCH OF LAKE BUTLER, INC.

Current Principal Place of Business:

195 EAST MAIN STREET
LAKE BUTLER, FL 32054

New Principal Place of Business:

Current Mailing Address:

195 EAST MAIN STREET
LAKE BUTLER, FL 32054

New Mailing Address:

FEI Number: 59-1840600

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNS, JASON D REV
195 EAST MAIN STREET
LAKE BUTLER, FL 32054 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: T () Delete
Name: JOHNSON, LISA MRS
Address: 195 EAST MAIN ST.
City-St-Zip: LAKE BUTLER, FL 32054

Title: P () Delete
Name: JOHNS, JASON D REV
Address: 195 EAST MAIN ST.
City-St-Zip: LAKE BUTLER, FL 32054

Title: D () Delete
Name: PETTIT, DON MR
Address: 195 EAST MAIN ST.
City-St-Zip: LAKE BUTLER, FL 32054

Title: D () Delete
Name: NORMAN, RANDALL MR
Address: 195 EAST MAIN STREET
City-St-Zip: LAKE BUTLER, FL 32054

Title: D () Delete
Name: MARTON, BOBBY MR
Address: 195 EAST MAIN STREET
City-St-Zip: LAKE BUTLER, FL 32054

Title: D () Delete
Name: SAUNDERS, STEVE MR
Address: 195 E MAIN STREET
City-St-Zip: LAKE BUTLER, FL 32054

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: WARREN, FRANCES S MRS
Address: 195 EAST MAIN ST.
City-St-Zip: LAKE BUTLER, FL 32054

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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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: F. SUZANNE WARREN

T

02/12/2009

Electronic Signature of Signing Officer or Director

Date