

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708254

FILED
Jan 30, 2009
Secretary of State

Entity Name: PINEY GROVE MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business:

2136 PINEY GROVE ROAD
COTTONDALE, FL 32431

New Principal Place of Business:

Current Mailing Address:

2136 PINEY GROVE ROAD
COTTONDALE, FL 32431

New Mailing Address:

FEI Number: 59-2436368

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

AUGER, CARLA L
2136 PINEY GROVE ROAD
COTTONDALE, FL 32431 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: P () Delete
Name: TAYLOR, FARRELL
Address: 2142 TAYLOR RD
City-St-Zip: COTTONDALE, FL 32431

Title: D () Delete
Name: DUNCAN, GUS
Address: 1387 TITTLE RD
City-St-Zip: COTTONDALE, FL 32431

Title: D () Delete
Name: TAYLOR, FARRELL
Address: 2142 TAYLOR RD
City-St-Zip: COTTONDALE, FL 32431

Title: ST () Delete
Name: AUGER, CARLA L
Address: 2136 PINEY GROVE ROAD
City-St-Zip: COTTONDALE, FL 32431

Title: D () Delete
Name: TAYLOR, CHARLES
Address: 2327 CORBIN RD
City-St-Zip: COTTONDALE, FL 32431

Title: D () Delete
Name: BARBER, DON
Address: 2142 NORTH RD
City-St-Zip: COTTONDALE, FL 32431

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: () 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: CARLA AUGER

ST

01/30/2009

Electronic Signature of Signing Officer or Director

Date