

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 28, 2009
Secretary of State

DOCUMENT# 708968

Entity Name: SHILOH BAPTIST ASSOCIATION, INC.**Current Principal Place of Business:**610 N ALEXANDER STREET
PLANT CITY, FL 33563 US**New Principal Place of Business:****Current Mailing Address:**610 N ALEXANDER STREET
PLANT CITY, FL 33563 US**New Mailing Address:****FEI Number:** 59-6045844**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MORRIS, DANNY L
610 N ALEXANDER STREET
PLANT CITY, FL 33563 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: JONES, JIMMY REV
Address: 13601 WALDEN SHEFFIELD RD
City-St-Zip: DOVER, FL 33527

Title: VP () Delete
Name: CLAYTON, WAYNE REV
Address: 5926 DUBOIS RD
City-St-Zip: LAKE LAND, FL 33811

Title: D () Delete
Name: COMBS, GARLAND REV
Address: 110 N FORBES ROAD
City-St-Zip: PLANT CITY, FL 33567

Title: ST () Delete
Name: DIAZ, GINNY R MRS
Address: 5708 HARVEY TEW ROAD
City-St-Zip: PLANT CITY, FL 33565

Title: D () Delete
Name: ADCOCK, HAZEL J MRS
Address: 805 COLEMAN DR
City-St-Zip: PLANT CITY, FL 33563

Title: P () Delete
Name: JONES, DAVID REV
Address: 3212 PINE CLUB DRIVE
City-St-Zip: PLANT CITY, FL 33566

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CLAYTON, WAYNE REV
Address: 5926 DUBOIS RD
City-St-Zip: LAKE LAND, FL 33811

Title: VP (X) Change () Addition
Name: DARRELL, JONES REV
Address: 8201 CEDAR GROVE CHURCH RD
City-St-Zip: PLANT CITY, FL 33567

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: GINNY DIAZ

ST

10/28/2009

Electronic Signature of Signing Officer or Director

Date