

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709628

FILED
Jan 20, 2009
Secretary of State

Entity Name: FIRST BAPTIST CHURCH, INC., OF DELEON SPRINGS, FLORIDA

Current Principal Place of Business:

4995 CENTRAL AVE
POB 908
DELEON SPRINGS, FL 32130

New Principal Place of Business:

4995 CENTRAL AVE
DELEON SPRINGS, FL 32130

Current Mailing Address:

4995 CENTRAL AVE
POB 908
DELEON SPRINGS, FL 32130

New Mailing Address:

P.O.BOX 908
DELEON SPRINGS, FL 32130

FEI Number: 59-1494213

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HESTER, BILL G
4455 CAVE LAKE ROAD
DE LEON SPRINGS, FL 32130 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: COPELAND, AL
Address: 4654 ORANGE DRIVE NORTH
City-St-Zip: DELEON SPRINGS, FL 32130

Title: T () Delete
Name: GAST, BOB
Address: 1855 CORTEZ DRIVE
City-St-Zip: PIERSON, FL 32180

Title: T () Delete
Name: ABBOTT, JOSEPH
Address: 217 CATALONIA AVENUE
City-St-Zip: DELEON SPRINGS, FL 32130

Title: T () Delete
Name: PURCELL, LEON M
Address: PO BOX 441
City-St-Zip: PIERSON, FL 32180

Title: T () Delete
Name: HESTER, BILL
Address: 4455 CAVE LAKE ROAD
City-St-Zip: DELEON SPRINGS, FL 32430

Title: T () Delete
Name: SMITH, WESLEY
Address: 340 PONCE DELEON BLVD
City-St-Zip: DE LEON SPRINGS, FL 32130

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: T (X) Change () Addition
Name: UNDERHILL, JOE
Address: PO BOX 1016
City-St-Zip: BARBERVILLE, FL 32105

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: BILL G. HESTER

T

01/20/2009

Electronic Signature of Signing Officer or Director

Date