2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# 713749

Entity Name: FAITH BAPTIST CHURCH OF LUNN ROAD, INC.

Current Principal Place of Business:

601 E. DERBY
AUBURNDALE, FL 33823 US

New Principal Place of Business:

2768 OLD DIXIE HIGHWAY
AUBURNDALE, FL 32778 US

Current Mailing Address:

P.O. BOX 1152
TAVARES, FL 32778 US

New Mailing Address:

FEI Number: 23-7009310 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIS, ONNA V.
67 WILLOW
TAVARES, FL 32778 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:	D	( ) Delete
Name:	MORGAN, GEORGE	
Address:	P.O.BOX 1152	
City-St-Zip:	TAVARES, FL 32778 US	
Title:	D	( ) Delete
Name:	MENDOZA, DAVID	
Address:	2768 OLD DIXIE HWY.	
City-St-Zip:	AVBURNDALE, FL 33823 US	
Title:	PD	( ) Delete
Name:	WILLIS, ONNA	
Address:	67 WILLOW	
City-St-Zip:	TAVARES, FL 32778 US	
Title:	S	( ) Delete
Name:	MENDOZA, MARILYN	
Address:	RT2768 OLD DIXIE HIGHWAY	
City-St-Zip:	AUBURNDALE, FL 33823 US	
Title:	D	( ) Delete
Name:	GASPARD, MELODY	
Address:	P.O. BOX 1152	
City-St-Zip:	TAVARES, FL 32778	
Title:	D	( ) Delete
Name:	MCMULLIN, DAVID	
Address:	4 STRONG ROW	
City-St-Zip:	BISBEE, AZ 85603 US	

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: GEORGE MORGAN D 04/13/2009
Electronic Signature of Signing Officer or Director — Date