

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 23, 2008 8:00 am
Secretary of State

04-23-2008 90028 043 ****61.25

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1. Entity Name

ST. JOHNS RIVER BAPTIST ASSOCIATION, INC.



Principal Place of Business

707 LAUREL STREET
PALATKA FL 32177-5149

Mailing Address

707 LAUREL STREET
PALATKA FL 32177-5149

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2123276

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/07)



6. Name and Address of Current Registered Agent

OSTEEN, BRENDA
707 LAUREL ST
PALATKA FL 32177

7. Name and Address of New Registered Agent

Name Greear, Asa Rev

Street Address (P.O. Box Number is Not Acceptable)
707 Laurel St

City Palatka

FL

Zip Code
32177

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when registering)

DATE

FILE NOW - FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE SCT
NAME PATTERSON, LYDIA ☐ Delete
STREET ADDRESS 321 GENTIAN RD
CITY-ST-ZIP ST AUGUSTINE FL 32086

TITLE STT
NAME OSTEEN, BRENDA ☒ Delete
STREET ADDRESS 707 LAUREL ST
CITY-ST-ZIP PALATKA FL 32177

TITLE D
NAME OSTEEN, LLOYD D ☒ Delete
STREET ADDRESS 818 CR 20A
CITY-ST-ZIP HAWTHORNE FL 32640

TITLE D
NAME SCOTT, EDWIN E ☒ Delete
STREET ADDRESS 707 LAUREL ST
CITY-ST-ZIP PALATKA FL 32177

TITLE PD
NAME BEAUCHAMP, BARRY ☐ Delete
STREET ADDRESS 3435 CRILL AVE
CITY-ST-ZIP PALATKA FL 32177

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE STT ☒ Change ☐ Addition
NAME Rodda, Benjamin
STREET ADDRESS 9760 McMahon Ave
CITY-ST-ZIP Hastings, FL 32145

TITLE D ☒ Change ☐ Addition
NAME Saunders, Mike
STREET ADDRESS PO Box 365
CITY-ST-ZIP Bunnell, FL 32110

TITLE D ☒ Change ☐ Addition
NAME Greear, Asa
STREET ADDRESS 707 Laurel ST
CITY-ST-ZIP Palatka FL 32177

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Signature and typed or printed name of signing officer or director

4-8-08 386 3285575