2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Aug 26, 2009
Secretary of State

DOCUMENT# 714550

Entity Name: BIBLE BAPTIST CHURCH OF LIVE OAK, INC.

Current Principal Place of Business:

321 EVA AVE NE
LIVE OAK, FL 32064 US

New Principal Place of Business:

Current Mailing Address:

321 EVA AVE NE
LIVE OAK, FL 32064 US

New Mailing Address:

FEI Number: 59-2995730 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BAILEY, BRAD PASTOR
9657 135TH DR.
LIVE OAK, FL 32060 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: PD ( ) Delete
Name: BAILEY, BRAD PASTOR
Address: 9657 135TH DR
City-St-Zip: LIVE OAK, FL 32060

Title: T ( ) Delete
Name: TRUAX, LARRY MR
Address: 359 SOUTHWEST GLEN CREST
City-St-Zip: LAKE CITY, FL 32024

Title: D ( ) Delete
Name: BROOKINS, LAVERN MR
Address: 13914 78TH ST.
City-St-Zip: LIVE OAK, FL 32060

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change ( ) Addition
Name: NORRIS, IDA B MRS
Address: P.O. BOX 1317
City-St-Zip: LIVE OAK, FL 32064

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D ( ) Change (X) Addition
Name: NORRIS, JR, OLIVER C MR
Address: P.O. BOX 1317
City-St-Zip: LIVE OAK, FL 32064

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: PASTOR BRAD BAILEY PD 08/26/2009

Electronic Signature of Signing Officer or Director — Date