

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719759

**FILED**  
**Feb 14, 2010**  
**Secretary of State**

**Entity Name:** BEULAH BAPTIST CHURCH OF CRAWFORDVILLE, FLORIDA, INC.

**Current Principal Place of Business:**

55 LOWER BRIDGE ROAD  
CRAWFORDVILLE, FL 32327

**New Principal Place of Business:**

55 DR. MARTIN LUTHER KING JR. MEMORIAL ROA  
CRAWFORDVILLE, FL 32327

**Current Mailing Address:**

5 LITTLE CREEK  
CRAWFORDVILLE, FL 32327

**New Mailing Address:**

FEI Number: 59-3165184

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BROWN, L.W.  
5 LITTLE CREEK  
CRAWFORDVILLE, FL 32327 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  
Name: STEVENS, TERRY  
Address: 9922 MRS MYRT WAY  
City-St-Zip: TALLAHASSEE, FL 32305

Title: D  
Name: TAYLOR, KENT  
Address: 220 FULTON HARVY ROAD  
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: D  
Name: BROWN, LONNIE W  
Address: 5 LITTLE CK DR  
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: P  
Name: BOWEN, MICHAEL K  
Address: 55 DR MARTIN LUTHER KING JR MEMORIAL ROAD  
City-St-Zip: CRAWFORDVILLE, FL 32327

I hereby 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 all other like empowered.

SIGNATURE: IMOGENE N. SANFORD

TREA

02/14/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date