

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722009

FILED  
Mar 19, 2009  
Secretary of State

Entity Name: PASCO BAPTIST ASSOCIATION, INC.

**Current Principal Place of Business:**

2537 HENLEY RD  
LUTZ, FL 33558 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 860  
LAND O'LAKES, FL 34639 US

**New Mailing Address:**

FEI Number: 59-2185515      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BENNETT, DEBRA L  
2537 HENLEY RD  
LUTZ, FL 33558 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: FOUNTOUKLIS, JOHN G  
Address: P.O. BOX 524  
City-St-Zip: TARPON SPRINGS, FL 34688 US

Title: S ( ) Delete  
Name: BENNETT, DEBRA L  
Address: 12023 JOE HERRMANN DRIVE  
City-St-Zip: SAN ANTONIO, FL 33576 US

Title: PM ( ) Delete  
Name: STEVENS, BRADLEY J  
Address: 9749 WALLASTON DRIVE  
City-St-Zip: DADE CITY, FL 33525 US

Title: VM ( ) Delete  
Name: ATKINSON, NEDDY L  
Address: 303 GRAND AVENUE  
City-St-Zip: MASARKYTOWN, FL 34604 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: S (X) Change ( ) Addition  
Name: BENNETT, DEBRA L  
Address: 12204 SAN ANGELA DRIVE  
City-St-Zip: SAN ANTONIO, FL 33576 US

Title: PM (X) Change ( ) Addition  
Name: GORDON, GEOFF  
Address: 16501 HARPER POND LANE, APT. 204  
City-St-Zip: ODESSA, FL 33556 US

Title: VM (X) Change ( ) Addition  
Name: GRAY, GEORGE  
Address: 14107 TENNYSON DRIVE  
City-St-Zip: HUDSON, FL 34677 US

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: DEBRA L. BENNETT

S

03/19/2009

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

\_\_\_\_\_  
Date