

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724125

FILED
Feb 18, 2009
Secretary of State

Entity Name: HAVERHILL BAPTIST DAY SCHOOL, INC.

Current Principal Place of Business:

671 NORTH HAVERHILL ROAD
WEST PALM BEACH, FL 33415

New Principal Place of Business:

Current Mailing Address:

671 NORTH HAVERHILL ROAD
WEST PALM BEACH, FL 33415

New Mailing Address:

FEI Number: 59-1709332

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUDSON, CHRISTOPHER
671 NORTH HAVERHILL ROAD
WEST PALM BEACH, FL 33415 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: BARKER, ANN
Address: 817 ASPEN RD
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D () Delete
Name: ATWELL, DIANA
Address: 5775 FERNLEY DRIVE W., #139
City-St-Zip: W. PALM BEACH, FL 33415

Title: D () Delete
Name: SEARFOSS, GLORIA
Address: 726 CAROLINE AVE
City-St-Zip: WEST PALM BEACH, FL 33413

Title: D () Delete
Name: D'AGOSTINE, SANDRA
Address: 83 EDEN LAWN TERR.
City-St-Zip: WEST PALM BEACH, FL 33415

Title: D () Delete
Name: MOORE, MICHAEL R
Address: 1100 CAMEO CIR
City-St-Zip: WEST PALM BEACH, FL 33417

Title: D () Delete
Name: O'NEIL, GAY
Address: 524 E. RAMBLING DR.
City-St-Zip: WELLINGTON, FL 33414

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: DIANA ATWELL

D

02/18/2009

Electronic Signature of Signing Officer or Director

Date