

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724821

FILED
Jan 19, 2009
Secretary of State

Entity Name: FIRST BAPTIST CHURCH OF HUDSON, FLORIDA, INC.

Current Principal Place of Business:

7009 HUDSON AVE
HUDSON, FL 34667 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5532
HUDSON, FL 34674 US

New Mailing Address:

FEI Number: 59-2348746

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KISTLER, STAN DR.
1725 TUMBLEWEED DR.
HOLIDAY, FL 34690 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: CC () Delete
Name: CHARLESTON, ROSELYN
Address: 12136 SPARTAN WAY - #202
City-St-Zip: HUDSON, FL 34667

Title: CT () Delete
Name: SHANKS, MITCHELL
Address: 6741 POMANDER AVE.
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: T () Delete
Name: DURNAN, WARREN
Address: 11763 SPRING TREE LANE
City-St-Zip: PORT RICHEY, FL 34668

Title: D () Delete
Name: GREER, JAMES
Address: 13114 SHADBERRY LN
City-St-Zip: HUDSON, FL 34667

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: CT (X) Change () Addition
Name: CHRISTINE, LASHER
Address: 14637 DAYSPRING DR., #3
City-St-Zip: HUDSON, FL 34667

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

Title: D (X) Change () Addition
Name: AL, GRAHAM
Address: 13114 SHADBERRY LN
City-St-Zip: HUDSON, FL 34667

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: DR. STAN KISTLER

PAST

01/19/2009

Electronic Signature of Signing Officer or Director

Date