

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727972

FILED
Apr 20, 2009
Secretary of State

Entity Name: MILL CREEK MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business:

6019 SR 16
ST. AUGUSTINE, FL 320926807 US

New Principal Place of Business:

Current Mailing Address:

6019 SR 16
ST. AUGUSTINE, FL 320926807 US

New Mailing Address:

FEI Number: 59-1526486 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BEECHER, DAVID
9470 C.R. 13 NORTH
ST. AUGUSTINE, FL 32092 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: P () Delete
Name: RAMSEY, (DONALD)
Address: 4070 RICH ROAD
City-St-Zip: GREEN COVE SPG., FL

Title: FVT () Delete
Name: BEECHER, DAVID
Address: 9470 C.R. 13 NORTH
City-St-Zip: ST. AUGUSTINE, FL

Title: D () Delete
Name: GRINER, PAUL
Address: 3950 S.R 206W
City-St-Zip: ELKTON, FL

Title: D () Delete
Name: SEVERT, DANNY
Address: 3455 OLD MOULTRIE RD
City-St-Zip: ST. AUGUSTINE, FL

Title: S () Delete
Name: RAMSEY, GLORIA
Address: 4070 RICH RD.
City-St-Zip: GREEN COVE SPGS, FL

Title: D () Delete
Name: SEVERT, GREG
Address: 3304 COASTAL HWY
City-St-Zip: ST. AUGUSTINE, FL

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: DAVID BEECHER

FVT

04/20/2009

Electronic Signature of Signing Officer or Director

_____ Date