2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#728660

FILED Jan 23, 2009 Secretary of State

Entity Name: LOCK HAVEN BAPTIST CHURCH OF BOGGY CREEK COMMUNITY

Current Principal Place of Business:		New Principal Place of Business:		
	GY CREEK R , FL 32824	D		
urrent Ma	ailing Addres	s:	New Mailing Addre	ess:
	GY CREEK R , FL 32824	D		
El Number:	59-1439199	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
ame and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
ANIEA DA				
809 EMME SSIMMEE	ETT ST E, FL 34741	US	purpose of changing its register	rod office or registered agent or both
he above i	ETT ST E, FL 34741		ourpose of changing its register	red office or registered agent, or both,
809 EMME SSIMMEE ne above the State	ETT ST E, FL 34741 named entity s of Florida.	submits this statement for the p		
809 EMME SSIMMEE ne above the State	ETT ST E, FL 34741 named entity s of Florida. EE: Electron	submits this statement for the particles in the particles of Registered Agric Signature of Registered Agric	ent	Date
309 EMME ISSIMMEE the above the State	ETT ST E, FL 34741 named entity s of Florida.	submits this statement for the particles in the particles of Registered Agric Signature of Registered Agric	ent	
809 EMME SSIMMEE ne above the State GNATUR	eTT ST E, FL 34741 named entity s of Florida. EE: Electron AND DIRECT	submits this statement for the particles of Registered Agr FORS: Delete	ent	Date
BO9 EMME SSIMMEE The above of the State GNATUR FFICERS Le: Le: Le: Le: Le: Lectory of the State	ett St E, FL 34741 named entity s of Florida. EE: Electron AND DIRECT PD () JONES, DAVID, 1309 EMMETT S KISSIMMEE, FL	ic Signature of Registered Agr FORS: Delete ST . 34741 Delete BLOSSOM TR.	ent ADDITIONS/CHAN Title: Name: Address:	Date GES TO OFFICERS AND DIRECTOR

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 B. JONES PD 01/23/2009