

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732952

FILED  
Jan 26, 2009  
Secretary of State

**Entity Name:** SHEPHERD ROAD BAPTIST CHURCH OF MULBERRY, INC.

**Current Principal Place of Business:**

3820 SHEPHERD ROAD  
MULBERRY, FL 33860

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1054  
MULBERRY, FL 33860

**New Mailing Address:**

**FEI Number:** 05-0113800

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COLLINS, GARY  
123 ELM COURT  
LAKELAND, FL 33813 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: VEREEN, FRANK,  
Address: 4618 HORTON RD  
City-St-Zip: PLANT CTY, FL 33567

Title: D ( ) Delete  
Name: SMITH, HARRISON  
Address: 7345 CORONET RD  
City-St-Zip: MULBERRY, FL 33860

Title: D ( ) Delete  
Name: COLLINS, GARY  
Address: 123 ELM COURT  
City-St-Zip: LAKELAND, FL 33813

Title: D ( ) Delete  
Name: DEVINE, NEIL  
Address: 5121 LAZY CREEK COURT  
City-St-Zip: LAKELAND, FL 33811

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**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: D ( ) Change (X) Addition  
Name: TURNER, JOHN  
Address: 2304 MAGNOLIA AVE  
City-St-Zip: LAKELAND, FL 33812

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: GARY C COLLINS

D

01/26/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date