

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 733917

FILED
Sep 29, 2009
Secretary of State

Entity Name: FIRST BAPTIST CHURCH OF LAKE HAMILTON, INC.

Current Principal Place of Business:

825 N.E. ALT. 27
LAKE HAMILTON, FL 33851

New Principal Place of Business:

Current Mailing Address:

825 N.E. ALT. 27
P.O. BOX 567
LAKE HAMILTON, FL 33851

New Mailing Address:

FEI Number: 59-2626670 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

TOWNS, TERRELL
233 LAKE LINK RD
WINTER HAVEN, FL 33884 US

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: TERRELL TOWNS

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CARNLEY, DEWEY
Address: 3365 BAHAMMA CT
City-St-Zip: LAKE WALES, FL 33898

Title: D () Delete
Name: MONROE, MATHEWS
Address: 330 NORTH 23RD STREET
City-St-Zip: HAINES CITY, FL

Title: D () Delete
Name: RESPRESS, DAVID
Address: 2 MULLINS RDD
City-St-Zip: WINTER HAVEN, FL 33880

Title: D () Delete
Name: TOWNS, TERRELL
Address: 233 LAKE LINK RD
City-St-Zip: WINTER HAVEN, FL 33833

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:

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: TERRELL TOWNS

D

09/29/2009

Electronic Signature of Signing Officer or Director

Date