2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2009
Secretary of State

DOCUMENT# 734224

Entity Name: HICKS ROAD BAPTIST CHURCH, INC.

Current Principal Place of Business:

12219 HICKS ROAD
HUDSON, FL 34669

New Principal Place of Business:

Current Mailing Address:

12219 HICKS ROAD
HUDSON, FL 34669

New Mailing Address:

FEI Number: 59-2400886 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCCRAY, ANDREW
12218 PARKWOOD STREET
HUDSON, FL 34669 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:	TS	( ) Delete
Name:	ATKINSON, MARLENE	
Address:	8206 HEARTWOOD LANE	
City-St-Zip:	HUDSON, FL 34667	
Title:	T	(X) Delete
Name:	HUGHES, MARK	
Address:	19110 LIVENGOOD RD	
City-St-Zip:	LAND O LAKES, FL 33559	
Title:	D	( ) Delete
Name:	REITER, TONY	
Address:	12202 HICKS ROAD	
City-St-Zip:	HUDSON, FL 34669	
Title:	D	( ) Delete
Name:	YOUNG, DELMA L	
Address:	10737 SHADY DRIVE	
City-St-Zip:	HUDSON, FL 34669	
Title:	CODP	( ) Delete
Name:	MCCRAY, ANDREW	
Address:	12218 PARKWOOD ST.	
City-St-Zip:	HUDSON, FL 34669	

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:	

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: ANDREW MCCRAY CODP 04/09/2009

Electronic Signature of Signing Officer or Director — Date