

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736179

FILED
Jan 26, 2009
Secretary of State

Entity Name: FIRST BAPTIST CHURCH OF HOMOSASSA, INC.

Current Principal Place of Business:

10540 W. YULEE DR.
HOMOSASSA, FL 34448 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 578
HOMOSASSA, FL 344870578 US

New Mailing Address:

FEI Number: 59-2333905

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TURVAVILLE, SKIP
9350 SPRING COVE RD
HOMOSASSA, FL 34448 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: DCO () Delete
Name: BUNTS, WARREN
Address: 10489 W MAIN ST
City-St-Zip: HOMOSASSA, FL 34448

Title: DT () Delete
Name: TUSVAVILLE, LINDA
Address: 9350 SPRING COVE RD
City-St-Zip: HOMOSASSA, FL 34448

Title: D () Delete
Name: BRAATZ, ROBERT
Address: 5266 S STETSON PT DRIVE
City-St-Zip: HOMOSASSA, FL 34448

Title: D () Delete
Name: TURVAVILLE, SKIP
Address: 9350 SPRING COVE RD
City-St-Zip: HOMOSASSA, FL 34448

Title: D () Delete
Name: ANDERSON, BOB
Address: 3 EUPHORBIA COURT
City-St-Zip: HOMOSASSA, FL 34446

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCO (X) Change () Addition
Name: TOPPING, RALPH
Address: 6112 W. RITA LANE
City-St-Zip: HOMOSASSA, FL 34446

Title: DT (X) Change () Addition
Name: TURVAVILLE, LINDA
Address: 9350 SPRING COVE RD
City-St-Zip: HOMOSASSA, FL 34448

Title: D (X) Change () Addition
Name: MIEDEMA, EDWARD
Address: 2902 S. AUDOBON TERR
City-St-Zip: HOMOSASSA, FL 34448

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: BOYLAND, THOMAS
Address: 3805 E. KIWI COVE CT.
City-St-Zip: HERNANDO, FL 34442

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: SKIP TURVAVILLE

TRUS

01/26/2009

Electronic Signature of Signing Officer or Director

Date