2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2009
Secretary of State

DOCUMENT# 739324

Entity Name: WESTSIDE BAPTIST CHURCH OF PERRY, FLORIDA, INCORPORATED

Current Principal Place of Business:

7195 PUCKETT RD
PERRY, FL 32348 US

New Principal Place of Business:

Current Mailing Address:

7195 PUCKETT RD
PERRY, FL 32348 US

New Mailing Address:

FEI Number: 59-1836034 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BUCKHALTER, RONNIE E
7195 PUCKETT ROAD
PERRY, FL 32348 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:	CARLTON, FRANKLIN,	
Address:	7307 PUCKETT RD	
City-St-Zip:	PERRY, FL 32348	
Title:	D	( ) Delete
Name:	BUCKHALTER, RONNIE,	
Address:	7195 PUCKETT RD	
City-St-Zip:	PERRY, FL 32348	
Title:	D	( ) Delete
Name:	COLSON, MACK,	
Address:	389 ELSIE RD	
City-St-Zip:	PERRY, FL 32347	
Title:	D	( ) Delete
Name:	NEWBERRY, GRADY	
Address:	6800 PUCKETT RD	
City-St-Zip:	PERRY, FL 32348	
Title:	STD	( ) Delete
Name:	GRAY, ROBERT L JR,	
Address:	7389 PUCKETT RD	
City-St-Zip:	PERRY, FL 32348	
Title:	D	( ) Delete
Name:	WRIGHT, DURAN	
Address:	1985 WOODMORE RD	
City-St-Zip:	PERRY, FL 32348	

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:	
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: RONNIE E. BUCKHALTER D 01/08/2009
Electronic Signature of Signing Officer or Director — Date