

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 12, 2009
Secretary of State**

DOCUMENT# 740728

Entity Name: THE FIRST BAPTIST CHURCH OF DAVENPORT, FLORIDA, INC.

Current Principal Place of Business:

110 MAPLE STREET WEST
DAVENPORT, FL 33837

New Principal Place of Business:

Current Mailing Address:

102 MAPLE STREET WEST
DAVENPORT, FL 33837

New Mailing Address:

FEI Number: 59-2355403 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROCKER, DAVID E.
411 NORTH BLVD. W.
DAVENPORT, FL 33837 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: DP () Delete
- Name: ROCKER, DAVID E
- Address: 411 NORTH BLVD W.
- City-St-Zip: DAVENPORT, FL

- Title: D () Delete
- Name: SMITH, GERALD S
- Address: 116 TERRACE DR
- City-St-Zip: HAINES CITY, FL 33844

- Title: DS () Delete
- Name: CONLEY, WENDELL
- Address: LAGO VISTA COURT
- City-St-Zip: DAVENPORT, FL 33837

- Title: D () Delete
- Name: LINDER, LEE
- Address: 627 POWER LINE RD
- City-St-Zip: DAVENPORT, FL 33837

- Title: DT () Delete
- Name: CHUMNEY, MILDRED W
- Address: EAST LEMON STREET
- City-St-Zip: DAVENPORT, FL 33837

- Title: DV () Delete
- Name: PREVATT, SONNIE
- Address: 90 ALTA VISTA WAY
- City-St-Zip: DAVENPORT, FL 33837

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: DAVID E ROCKER

DP

03/12/2009

Electronic Signature of Signing Officer or Director

_____ Date