

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741508

FILED
Apr 09, 2009
Secretary of State

Entity Name: FELLOWSHIP BAPTIST CHURCH OF SOUTH SEMINOLE COUNTY, INC.

Current Principal Place of Business:

5344 RED BUG LAKE ROAD
P.O. BOX 181191
CASSELBERRY, FL 327188191

New Principal Place of Business:

5344 RED BUG LAKE ROAD
CASSELBERRY, FL 327181191

Current Mailing Address:

5344 RED BUG LAKE ROAD
P.O. BOX 181191
CASSELBERRY, FL 327188191

New Mailing Address:

PO BOX 181191
CASSELBERRY, FL 327181191

FEI Number: 59-1818065

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLEIN, JON
1700 PERCH LANE
SANFORD, FL 32771 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: PD () Delete
Name: KLEIN, JON
Address: 1700 PERCH LANE
City-St-Zip: SANFORD, FL

Title: SD () Delete
Name: LLOYD, BLANCHE
Address: 1101 LLOYD'S LANE
City-St-Zip: MAITLAND, FL

Title: TD () Delete
Name: O'BRYANT, JIM
Address: 5066 TANGERINE AVE.
City-St-Zip: WINTER PARK, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KLEIN, JON
Address: 1700 PERCH LANE
City-St-Zip: SANFORD, FL 32771

Title: SD (X) Change () Addition
Name: LLOYD, BLANCHE
Address: 1101 LLOYD'S LANE
City-St-Zip: MAITLAND, FL 32794

Title: TD (X) Change () Addition
Name: O'BRYANT, JIM
Address: 5066 TANGERINE AVE.
City-St-Zip: WINTER PARK, FL 32792

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: JIM O'BRYANT

TD

04/09/2009

Electronic Signature of Signing Officer or Director

Date