

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741936

FILED  
Feb 17, 2009  
Secretary of State

**Entity Name:** PINE FOREST ESTATES BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

2550 WEST NINE MILE ROAD  
PENSACOLA, FL 32534

**New Principal Place of Business:**

**Current Mailing Address:**

2550 WEST NINE MILE ROAD  
PENSACOLA, FL 32534

**New Mailing Address:**

**FEI Number:** 59-2350604

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DAVIS, MIKE  
8730 SHARON LANE  
PENSACOLA, FL 32534 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: P ( ) Delete  
Name: DAVIS, MIKE  
Address: 8730 SHARON LANE  
City-St-Zip: PENSACOLA, FL 32534

Title: T ( ) Delete  
Name: GIPSON, GRACE  
Address: 4651 WILDE LAKE BLVD  
City-St-Zip: PENSACOLA, FL 32526

Title: VD ( ) Delete  
Name: HUBLEY, JOHN  
Address: 6069 ST. ALBAN RD  
City-St-Zip: PENSACOLA, FL 32503

Title: D ( ) Delete  
Name: STANLEY, MERIDETH  
Address: 1968 WINNERS CIR.  
City-St-Zip: CANTONMENT, FL 32533

Title: D ( ) Delete  
Name: RUSSELL, KING  
Address: 513 RONDA  
City-St-Zip: PENSACOLA, FL 32513

Title: S ( ) Delete  
Name: TWARKIN, FERRYIN  
Address: 4932 WOODBINE RD  
City-St-Zip: PACE, FL 32571

**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: D (X) Change ( ) Addition  
Name: WILLIAMS, JERRY  
Address: 4715 PEBBLE CREEK DR.  
City-St-Zip: PENSACOLA, FL 32526

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: GRACE GIPSON

T

02/17/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date