

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742218

FILED  
Sep 10, 2009  
Secretary of State

**Entity Name:** ROCKY BAYOU BAPTIST CHURCH, INCORPORATED

**Current Principal Place of Business:**

2401 N. PARTIN DRIVE  
NICEVILLE, FL 32578

**New Principal Place of Business:**

**Current Mailing Address:**

2401 N. PARTIN DRIVE  
NICEVILLE, FL 32578

**New Mailing Address:**

**FEI Number:** 59-1876297      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

JULIO, DALE A  
44 WERK LAKE CT  
NICEVILLE, FL 32578      US

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

WOLLARD, MARIBETH A  
215 GALWAY DRIVE  
NICEVILLE, FL 32578      US

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: MARIBETH A. WOLLARD

09/10/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CO      ( ) Delete  
Name: MOULDEN, WILLIAM R  
Address: 208 GALWAY DRIVE  
City-St-Zip: NICEVILLE, FL 32578

Title: D      ( ) Delete  
Name: LINDER, SCOTT  
Address: 1205 WHITEWOOD WAY  
City-St-Zip: NICEVILLE, FL 32578

Title: D      ( ) Delete  
Name: OLIMB, HAL  
Address: 1816 HUNTING ROAD  
City-St-Zip: NICEVILLE, FL 32578

Title: TR      ( ) Delete  
Name: WOLLARD, MARIBETH  
Address: 215 GALWAY DRIVE  
City-St-Zip: NICEVILLE, FL 32578

Title: D      (X) Delete  
Name: OLSON, CAREY W  
Address: 4120 CALLAWAY DRIVE  
City-St-Zip: NICEVILLE, FL 32578

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D      (X) Change ( ) Addition  
Name: WILKE, MARK  
Address: 1805 RATTAN PALM DRIVE  
City-St-Zip: NICEVILLE, FL 32578

Title: D      (X) Change ( ) Addition  
Name: OLIMB, HAL  
Address: 1816 HUNTINGTON ROAD  
City-St-Zip: NICEVILLE, FL 32578

Title: D      (X) Change ( ) Addition  
Name: OLSON, CAREY  
Address: 4120 CALLAWAY DRIVE  
City-St-Zip: NICEVILLE, FL 32578

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: MARIBETH WOLLARD

TR

09/10/2009

Electronic Signature of Signing Officer or Director

Date