

# 2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 745693

FILED  
Jun 09, 2014  
Secretary of State

**Entity Name:** WELAKA BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

670 3RD AVENUE  
WELAKA, FL 32193

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 100  
WELAKA, FL 32193

**New Mailing Address:**

**FEI Number:** 59-3222414

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILLIAMS, WILLIAM E  
413 MELROSE AVE  
GREEN COVE SPRINGS, FL 32043 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: WILLIAM E. WILLIAMS

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: T  
Name: BASFORD, SHIRLEY  
Address: PO BOX 42  
City-St-Zip: WELAKA, FL

Title: AC  
Name: WEBB, MARY  
Address: 370 COUNTY RD 309, SATAUM, FL, PO BOX 1173  
City-St-Zip: WELAKA, FL 32193

Title: TR  
Name: FORSYTHE, QUEENIE  
Address: 206 ZEAGLER DR., APT 62  
City-St-Zip: PALATKA, FL 32177

Title: TD  
Name: BASFORD, BOBBY  
Address: 500 WALNUT ST  
City-St-Zip: WELAKA, FL 32193

Title: P  
Name: WILLIAMS, WILLIAM E  
Address: 413 MELROSE AVE  
City-St-Zip: GREEN COVE SPRINGS, FL 32043

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM E. WILLIAMS

PAST

06/09/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date