

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746284

FILED  
Apr 13, 2009  
Secretary of State

**Entity Name:** DAMASCUS FREEWILL BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

3700 KYNESVILLE ROAD  
MARIANNA, FL 324465955

**New Principal Place of Business:**

**Current Mailing Address:**

3534 ONTARIO RD.  
MARIANNA, FL 32448 US

**New Mailing Address:**

**FEI Number:** 59-2777238

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

REHBERG, ROBERT O  
2427 MARTIN RD  
MARIANNA, FL 32448 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: REHBERG, ROBERT O  
Address: 2427 MARTIN ROAD  
City-St-Zip: MARIANNA, FL 32448

Title: DST ( ) Delete  
Name: REHBERG, RICHARD O.  
Address: 3524 ONTARIO ROAD  
City-St-Zip: MARIANNA, FL 32448

Title: D ( ) Delete  
Name: CHAFIN, HOWARD  
Address: 4018 LARAMORE ROAD  
City-St-Zip: MARIANNA, FL

Title: D ( ) Delete  
Name: WILLIAMS, STEPHEN G  
Address: 1659 HIGHWAY 73  
City-St-Zip: MARIANNA, FL 32448

Title: D ( ) Delete  
Name: HERBERT, WILLIAMS  
Address: 2472 FILLMORE DR.  
City-St-Zip: MARIANNA, FL 32448

**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: ROBERT O. REHBERG

PD

04/13/2009

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

\_\_\_\_\_  
Date