2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748895

FILED Jun 01, 2009 Secretary of State

Entity Name: OPEN DOOR BAPTIST CHURCH OF FT. LAUDERDALE, INC.

Current Principal Place of Business: New Principal Place of Business:

6776 SUNSET STRIP SUNRISE, FL 33313 US

Current Mailing Address: New Mailing Address:

6776 SUNSET STRIP SUNRISE, FL 33313 US

FEI Number: 59-1969037 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: Name and Address of New Registered Agent:

BLAKE, ORVILLE 6776 SUNSET STRIP SUNRISE, FL 33313 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:

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Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 VPT () Delete
 Title:
 VPT (X) Change () Addition

 Name:
 NICHOLSON, CLEVELAND
 Name:
 JAMES, GILBERT

 Address:
 3541 NW 23RD ST
 Address:
 4141 NW 39 AVENUE

City-St-Zip: LAUDERDALE LAKES, FL 33311 City-St-Zip: LAUDERDALE LAKES, FL 33309

Title: T () Delete Title: T (X) Change () Addition

Name:BLACKMAN, KURTName:MCKEITHEN, ARCHIEAddress:6801 NW 6 COURTAddress:3300 NW 23 COURT

City-St-Zip: MARGATE, FL 33063 City-St-Zip: LAUDERDALE LAKES, FL 33311

Title: PD () Delete Title: () Change () Addition

 Name:
 BLAKE, ORVILLE
 Name:

 Address:
 6776 SUNSET STRIP
 Address:

 City-St-Zip:
 SUNRISE, FL 33313 US
 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: ORVILLE BLAKE PD 06/01/2009