## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#751673**

FILED Mar 17, 2009 Secretary of State

Entity Name: HURRICANE CREEK BAPTIST CHURCH, INC.

Current Principal Place of Business:			New Prince	New Principal Place of Business:	
% LARRY	ZORN				
HWY 2A WESTVILL	LE, FL 32464				
Current M	lailing Address		New Maili	ng Address:	
1163 ZOR WESTVILL	N LN LE, FL 32464				
FEI Number: 59-2866431 FEI Number Applied For ( )		FEI Number Not App	licable ( ) Certificate of Status Desired ( )		
Name and	l Address of Cu	rrent Registered Agent:	Name and	Address of New Registered Agent:	
1192 HWY	ILLIAM E., SR 72A LE, FL 32464	US			
	e named entity su e of Florida.	bmits this statement for the p	ourpose of changing i	its registered office or registered agent, or both,	
SIGNATU					
	Electronic	Signature of Registered Age	ent	Date	
OFFICER	S AND DIRECTO	DRS:	ADDITION	IS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	D () D JOHNSON, WILLI 1195 HWY 1 WESTVILLE, FL	E	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition JOHNSON, WILLIE 1195 HWY 2 WESTVILLE, FL 32464	
Title: Name: Address: City-St-Zip:	D () D SEWELL, WILLIE 1376 HWY 29 WESTVILLE, FL	F	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () D STAFFORD, RON 1069 HWY 81 N WESTVILLE, FL	ALD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () D YARBOROUGH, S 1465 N. HWY 81 WESTVILLE, FL	S.K.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () D ZORN, LARRY 1163 ZORN LANE WESTVILLE, FL		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () D YARBROUGH, PH 1154 N. HWY 81 WESTVILLE, FL	ILLIP JR	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: LARRY ZORN T 03/17/2009