2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753847

FILED Feb 19, 2009 Secretary of State

Entity Name: DUNNS CREEK BAPTIST CHURCH, INC. **Current Principal Place of Business: New Principal Place of Business:** 1425 STARRATT ROAD JACKSONVILLE, FL 32218 **Current Mailing Address: New Mailing Address:** 1425 STARRATT ROAD JACKSONVILLE, FL 32218 FEI Number: 59-1367512 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: **NEWMAN ROBERT S** NEWMAN, ROBERT S TRUSTEE 15430 CAPE DR N 15430 CAPE DR N JACKSONVILLE, FL 32218 JACKSONVILLE, FL 32218 US 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: ROBERT S. NEWMAN 02/19/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete NEWMAN ROBERT S. Name: Name: 15430 CAPE DR N Address: Address: City-St-Zip: JACKSONVILLE, FL City-St-Zip: Title: SD Title: (X) Change () Addition () Delete Name: OWENS, JOYCE Name: HARRIS, VIVIAN FS Address: 3101 STARRATT RD Address: 3101 STARRATT RD City-St-Zip: JACKSONVILLE, FL City-St-Zip: JACKSONVILLE, FL Title: () Delete Title: () Change () Addition HENDRY, MARY ANN Name: Name: Address: 2230 STARRATT RD Address: City-St-Zip: JACKSONVILLE, FL 32226 City-St-Zip: Title: SD () Delete Title: () Change () Addition Name: HAWKINS, SHELIA Name: 1126 ARCARO COURT Address: Address: City-St-Zip: JACKSONVILLE, FL 32218 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: VIVIAN HARRIS FS 02/19/2009