

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762311

FILED  
Mar 18, 2009  
Secretary of State

**Entity Name:** FIRST BAPTIST CHURCH OF TRENTON, INC.

**Current Principal Place of Business:**

HWY. 26 AT N.E. 2ND ST.  
TRENTON, FL 32693

**New Principal Place of Business:**

118 NE 2ND STREET.  
TRENTON, FL 32693

**Current Mailing Address:**

PO BOX 293  
TRENTON, FL 32693

**New Mailing Address:**

118 NE 2ND STREET  
TRENTON, FL 32693

**FEI Number:** 59-1437448

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BUSH, WILBUR C.  
402 S.W. 5TH AVE.  
TRENTON, FL 32693 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: SD ( ) Delete  
Name: BRADLEY, CLIFTON,  
Address: HWY 26 WEST  
City-St-Zip: TRENTON, FL

Title: TD ( ) Delete  
Name: SCOTT, LOIS,  
Address: SO OF HWY 26  
City-St-Zip: TRENTON, FL

Title: PD ( ) Delete  
Name: BUSH, WILBUR C.,  
Address: 402 S.W. 5TH AVENUE  
City-St-Zip: TRENTON, FL

Title: D ( ) Delete  
Name: PARK, WILLIAM  
Address: 2609 SW CR 307-A  
City-St-Zip: TRENTON, FL 32693

Title: D ( ) Delete  
Name: FATE, SEAY  
Address: 6530 SW 70TH ST  
City-St-Zip: TRENTON, FL 32693

**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: LOIS SCOTT

TD

03/18/2009

Electronic Signature of Signing Officer or Director

Date