

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763734

FILED  
Apr 10, 2008  
Secretary of State

**Entity Name:** DAYSPRING BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

5654 DUNN AVENUE  
JACKSONVILLE, FL 32218 US

**New Principal Place of Business:**

**Current Mailing Address:**

5654 DUNN AVENUE  
JACKSONVILLE, FL 32218 US

**New Mailing Address:**

**FEI Number:** 59-2458692

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

ROBERTA, JOSEPH  
5654 DUNN AVE  
JACKSONVILLE, FL 32218 US

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

ROBERTS, JOSEPH  
5654 DUNN AVE  
JACKSONVILLE, FL 32218 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: JOSEPH ROBERTS

04/10/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CTR ( ) Delete  
Name: WESTON, BENNIE J  
Address: 3103 MONTCALM DR  
City-St-Zip: JACKSONVILLE, FL 32208

Title: TR ( ) Delete  
Name: MAPSON, CHARLES E  
Address: 908 PARK FOREST LANE  
City-St-Zip: JACKSONVILLE, FL 32211

Title: T ( ) Delete  
Name: BROWN, LARRY  
Address: 4941 CHIVALRY DRIVE  
City-St-Zip: JACKSONVILLE, FL 32208

Title: AD ( ) Delete  
Name: ROBERTS, JOSEPH  
Address: 2205 COLLEGE CIRCLE  
City-St-Zip: JACKSONVILLE, FL 32209

Title: CL ( ) Delete  
Name: BULLOCK, JUDY Y  
Address: 3830 MILLPOINT DRIVE  
City-St-Zip: JACKSONVILLE, FL 32257

Title: TR ( ) Delete  
Name: BLUE, PATRICIA W  
Address: 6196 RAINTREE ROAD  
City-St-Zip: JACKSONVILLE, FL 32277

**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:

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: BENNIE J. WESTON

CTR

04/10/2008

Electronic Signature of Signing Officer or Director

Date