

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763734

FILED
Apr 08, 2009
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 ()

Name and Address of Current Registered Agent:

ROBERTS, JOSEPH
5654 DUNN AVE
JACKSONVILLE, FL 32218 US

Name and Address of New Registered Agent:

WILLIAMS, TERRI L
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: TERRI L. WILLIAMS

04/08/2009

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: TERRI L. WILLIAMS

RA

04/08/2009

Electronic Signature of Signing Officer or Director

Date