

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003230

FILED
Apr 12, 2009
Secretary of State

Entity Name: ANTIOCH BAPTIST CHURCH OF QUINCY FLORIDA, INC.

Current Principal Place of Business:

284 MCCALL BRIDGE RD
QUINCY, FL 32351

New Principal Place of Business:

Current Mailing Address:

284 MCCALL BRIDGE RD
QUINCY, FL 32351

New Mailing Address:

FEI Number: 59-1756512

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STODARD, RHONDA
1461 MCCALL BRIDGE RD
QUINCY, FL 32351 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: DT () Delete
Name: MORRIS, KIRBY
Address: 418 N. 9TH STREET
City-St-Zip: QUINCY, FL 32351

Title: TT () Delete
Name: STODARD, RHONDA
Address: 1461 MCCALL BRIDGE ROAD
City-St-Zip: QUINCY, FL 32351

Title: ST () Delete
Name: HARNAGE, NANCY
Address: 4798 PAT THOMAS HWY.
City-St-Zip: QUINCY, FL 32351

Title: SSD () Delete
Name: PARRAMORE, IMA GLENN
Address: OLD FEDERAL RD
City-St-Zip: QUINCY, FL 32351

Title: WMUD () Delete
Name: JOHNSON, FRANCES
Address: 552 THARPE CIRCLE
City-St-Zip: QUINCY, FL 32351

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: RHONDA B. STODARD

TT

04/12/2009

Electronic Signature of Signing Officer or Director

Date