2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0100000300

FILED Apr 29, 2009 Secretary of State

Entity Name: ASSOCIATED BAPTIST PRESS FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business: 11905 LORETTO SQUARE DR 8902 ELIZABETH FALLS DRIVE JACKSONVILLE, FL 32223 JACKSONVILLE, FL 32257 **Current Mailing Address: New Mailing Address:** POST OFFICE BOX 23769 JACKSONVILLE, FL 32241 FEI Number: 59-3691741 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: WATSON, TODD 7785 BAYMEADOWS WAY SUITE 107 JACKSONVILLE, FL 32256 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition TOBIAS, HUGH GOUGH, KERRY Name: Name: 14248 MIDDLEHAM LANE Address: 693 GLEN ABBEY DRIVE Address: City-St-Zip: JACKSONVILLE, FL 32223 City-St-Zip: AUGUSTA, GA 30907 Title: MGR Title: MGR (X) Change () Addition () Delete WILKINSON, DAVID R WARNER, GREGORY D Name: Name: Address: 11905 LORETTO SQUARE DR Address: 3116 MAPLE AVENUE City-St-Zip: JACKSONVILLE, FL 32223 City-St-Zip: WACO, TX 76707 Title: () Delete Title: (X) Change () Addition GOUGH, KERRY UNGER, BRIAN Name: Name: 693 GLEN ABBEY DRIVE 401 LAKESIDE DRIVE Address: Address: City-St-Zip: AUGUSTA, GA 30907 City-St-Zip: LIBERTY, MO 64068 Title: () Delete Title: () Change () Addition Name: FREEMAN, JOHN Name: 11427 WEST RICKS CIRCLE Address: Address: City-St-Zip: DALLAS, TX 75230 City-St-Zip: Title: (X) Delete Title: () Change () Addition UNGER, BRIAN Name: Name: 401 LAKESIDE DRIVE Address: Address: City-St-Zip: LIBERTY, MO 64068 City-St-Zip: Title: (X) Delete Title: () Change () Addition VICK, ED Name: Name: Address: 2205 NANCY ANN DRIVE Address: RALEIGH, NC 27607 City-St-Zip: 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: DAVID R. WILKINSON MGR 04/29/2009