2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2009
Secretary of State

DOCUMENT# N01000003506

Entity Name: NEW BEULAH MISSIONARY BAPTIST CHURCH OF HAINES CITY, INC.

Current Principal Place of Business:

1706 NORTH 12TH ST.
HAINES CITY, FL 33844

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1939
HAINES CITY, FL 33844

New Mailing Address:

FEI Number: 59-3799134 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOWARD, III, DOLPHUS
2713 ORCHID DRIVE
HAINES CITY, FL 33844 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: VD ( ) Delete
Name: JOHNSON, ERSLEY
Address: 1010 BATES ROAD
City-St-Zip: HAINES CITY, FL 33844

Title: TD ( ) Delete
Name: COBB, JOHN
Address: 22 TANGELO DR.
City-St-Zip: HAINES CITY, FL 33844

Title: SD ( ) Delete
Name: HOWARD, JOSEPHINE
Address: 2711 ORCHID DRIVE
City-St-Zip: HAINES CITY, FL 33844

Title: PD ( ) Delete
Name: HOLT, ALONZO
Address: 1440 BATES RD.
City-St-Zip: HAINES CITY, FL 33844

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:

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: DOLPHUS HOWARD, III RA 02/25/2009

Electronic Signature of Signing Officer or Director — Date