2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2009
Secretary of State

DOCUMENT# N01000005573

Entity Name: FAITH BAPTIST CHURCH OF INTERLACHEN, INC.

Current Principal Place of Business:

512 EAST TREMONT ST.
INTERLACHEN, FL 32148

New Principal Place of Business:

Current Mailing Address:

P.O BOX 326
INTERLACHEN, FL 32148

New Mailing Address:

FEI Number: 59-2515216 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPEICHER, MELVIN D
512 EAST TREMONT ST.
INTERLACHEN, FL 32148 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: D ( ) Delete
Name: SPEICHER, MELVIN D
Address: 183 CHARITY LANE
City-St-Zip: INTERLACHEN, FL 32148

Title: D ( ) Delete
Name: FRAME, BOBBY
Address: 105 WARF TRAIL
City-St-Zip: HOLLISTER, FL 32147

Title: D ( ) Delete
Name: LAFIRIRA, ROGER
Address: 105 SALEM
City-St-Zip: INTERLACHEN, FL 32148

Title: D ( ) Delete
Name: FRAME, JACK
Address: 103 WARF TRAIL
City-St-Zip: HOLLISTER, FL 32147

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: SPEICHER, MELVIN D PASTOR
Address: 183 CHARITY LANE
City-St-Zip: INTERLACHEN, FL 32148

Title: D (X) Change ( ) Addition
Name: FRAME, ROBERT TRUSTEE
Address: 105 WARF TRAIL
City-St-Zip: HOLLISTER, FL 32147

Title: D (X) Change ( ) Addition
Name: LAFIRIRA, ROGER TRUSTEE
Address: 105 SALEM
City-St-Zip: INTERLACHEN, FL 32148

Title: D (X) Change ( ) Addition
Name: FRAME, JACK TRUSTEE
Address: 103 WARF TRAIL
City-St-Zip: HOLLISTER, FL 32147

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: MELVIN D. SPEICHER PAST 03/17/2009

Electronic Signature of Signing Officer or Director — Date