

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 16, 2009**  
**Secretary of State**

DOCUMENT# N01000006319

Entity Name: IGLESIA BAUTISTA DEERMEADOWS, INC.

**Current Principal Place of Business:**

9780 BAYMEADOWS ROAD  
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

**Current Mailing Address:**

9780 BAYMEADOWS ROAD  
JACKSONVILLE, FL 32256

**New Mailing Address:**

FEI Number: 59-3757947      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

VEGA, JOSE  
2177 BRIAN LAKES DR. N.  
JACKSONVILLE, FL 32221      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: VASQUEZ, RAUL  
Address: 4078 NORTH CHINOOK LANE  
City-St-Zip: ORMOND BEACH, FL 32174
- Title: DA      ( ) Delete  
Name: VEGA, JOSE  
Address: 3875 SOUTH PABLO ROAD, #102  
City-St-Zip: JACKSONVILLE, FL 32224
- Title: D      ( ) Delete  
Name: HURT, HUBERT  
Address: 14879 SUSANNA WOODS COURT  
City-St-Zip: JACKSONVILLE, FL 32257
- Title: D      ( ) Delete  
Name: ALFONSO, SUDAMYS  
Address: 11674 HAMPTON PARK BLVD  
City-St-Zip: JACKSONVILLE, FL 32256
- Title: D      (X) Delete  
Name: MEDRANO, SAUL  
Address: 3795 CARDINAL OAKS CIRCLE  
City-St-Zip: ORANGE PARK, FL 32065
- Title: D      (X) Delete  
Name: SMITH, RICK  
Address: 13930 SUGAR PINE CT.  
City-St-Zip: JACKSONVILLE, FL 32225

**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: TREASURER/SUDAMYS ALFONSO

MS.

01/16/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date