

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006485

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: APALACHEE BAPTIST ASSOCIATION, INC.

**Current Principal Place of Business:**

16646 SE PEAR STREET  
BLOUNTSTOWN, FL 32424

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 847  
BLOUNTSTOWN, FL 32424

**New Mailing Address:**

FEI Number: 59-3630422

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROBERTS, CLYDE N  
7871 NW RIVER ROAD  
BRISTOL, FL 32321 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: ROBERTS, CLYDE N  
Address: 7871 NW RIVER ROAD  
City-St-Zip: BRISTOL, FL 32321

Title: C ( ) Delete  
Name: REVELL, CATHRY B  
Address: P.O. BOX 926  
City-St-Zip: BRISTOL, FL 32321

Title: T ( ) Delete  
Name: GUILFORD, FRANK JR  
Address: 16646 SE PEAR STREET  
City-St-Zip: BLOUNTSTOWN, FL 32424

**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:

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: FRANK GUILFORD JR

TREA

04/28/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date