

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006432

FILED
Apr 30, 2009
Secretary of State

Entity Name: SHADY GROVE BAPTIST CHURCH OF GRAND RIDGE, FLORIDA, INC.

Current Principal Place of Business:

7304 BIRCHWOOD RD
GRAND RIDGE, FL 32442

New Principal Place of Business:

Current Mailing Address:

7304 BIRCHWOOD RD
GRAND RIDGE, FL 32442

New Mailing Address:

FEI Number: 59-2344839

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KINARD, ALLEN K
580 BLUEBERRY DR
GRAND RIDGE, FL 32442 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: P () Delete
Name: SWAFFORD, JAMES E REV
Address: PO BOX 947
City-St-Zip: BLOUNTSTOWN, FL 32424

Title: T () Delete
Name: KINARD, ALLEN
Address: 7304 BIRCHWOOD RD
City-St-Zip: GRAND RIDGE, FL 32442

Title: T () Delete
Name: CARPENTER, CHERIE
Address: 7304 BIRCHWOOD RD
City-St-Zip: GRAND RIDGE, FL 32442

Title: T () Delete
Name: ROBERTS, LOLA N
Address: 826 STONE RD
City-St-Zip: GRAND RIDGE, FL 32442

Title: C () Delete
Name: KINARD, BEVERLY
Address: 580 BLUEBERRY DR
City-St-Zip: GRAND RIDGE, FL 32442

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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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: BEVERLY KINARD

C

04/30/2009

Electronic Signature of Signing Officer or Director

Date