## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000009536

FILED Apr 27, 2009 Secretary of State

Entity Name: ST. LUKE BAPTIST CHURCH, MARIANNA, FLORIDA INC.

**Current Principal Place of Business: New Principal Place of Business:** 2871 ORANGE STREET MARIANNA, FL 32448 US **Current Mailing Address: New Mailing Address:** P. O. BOX 5806 MARIANNA, FL 32447 US FEI Number: 59-2346321 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MILTON, HOWARD JR 2871 ORANGE STREET MARIANNA, FL 32447 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition CLAY, ELMER R CLAY, ELMER R Name: Name: 4073 ENGLISH ROAD Address: 4073 ENGLISH ROAD Address: City-St-Zip: MARIANNA, FL 32448 US City-St-Zip: MARIANNA, FL 32448 US Title: () Delete Title: (X) Change ( ) Addition WILLIAMS, RANDY Name: WILLIAMS, RANDY Name: Address: 4528 BELLAMY BRIDGE ROAD Address: 4528 BELLAMY BRIDGE ROAD City-St-Zip: MARIANNA, FL 32446 US City-St-Zip: MARIANNA, FL 32446 US Title: () Delete Title: (X) Change ( ) Addition GARVIN, ANNIE CLAY, MAURICE M Name: Name: 3775 OLD US ROAD Address: 4525 JACKSON STREET Address: City-St-Zip: MARIANNA, FL 32448 US City-St-Zip: MARIANNA, FL 32446 US Title: () Delete Title: () Change () Addition Name: HOLDEN, DELORIS Name: Address: 2104 TANNER ROAD Address: City-St-Zip: MARIANNA, FL 32448 US City-St-Zip: Title: () Delete Title: () Change () Addition MILTON, HOWARD JR. Name: Name: 4215 HICKORY LANE Address: Address: City-St-Zip: MARIANNA, FL 32448 US City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition ROBINSON, WALTER KELLY, LEON Name: Name: Address: 4222 ROULHAC ST. Address: 3605 BUMPNOSE ROAD MARIANNA, FL 32448 MARIANNA, FL 32446 City-St-Zip: 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: MAURICE M. CLAY S 04/27/2009