

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009828

FILED
Feb 06, 2008
Secretary of State

Entity Name: CEDAR GROVE BAPTIST CHURCH, INC.

Current Principal Place of Business:

8201 CEDAR GROVE CHURCH ROAD
PLANT CITY, FL 33567

New Principal Place of Business:

Current Mailing Address:

8201 CEDAR GROVE CHURCH ROAD
PLANT CITY, FL 33567

New Mailing Address:

FEI Number: 59-2362170

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAMESON, EARL
8426 EDISON RD
LITHIA, FL 33547 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: SWILLEY, DORIS
Address: 509 W. SWILLEY RD
City-St-Zip: PLANT CITY, FL 33567

Title: D () Delete
Name: HICKS, MARION
Address: 602 E KEYSVILLE RD
City-St-Zip: PLANT CITY, FL 33567

Title: D () Delete
Name: JAMESON, EARL W
Address: 8426 EDISON RD
City-St-Zip: LITHIA, FL 33547

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: EARL W. JAMESON

MR.

02/06/2008

Electronic Signature of Signing Officer or Director

Date