

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001974

FILED
Jul 13, 2009
Secretary of State

Entity Name: OLD PROVIDENCE BAPTIST CHURCH, INC.

Current Principal Place of Business:

9316 NW CR 245
LAKE BUTLER, FL 32054

New Principal Place of Business:

Current Mailing Address:

9316 NW CR 245
LAKE BUTLER, FL 32054

New Mailing Address:

FEI Number: 14-1874876 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

EDENFIELD, RANDALL
158 SW EDENFIELD WAY
LAKE CITY, FL 32024 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: PD () Delete
Name: TUGGLE, JACK
Address: 8151 SW CR 245
City-St-Zip: LAKE BUTLER, FL 32054

Title: S () Delete
Name: TUGGLE, JACKIE
Address: 8151 SW CR 245
City-St-Zip: LAKE BUTLER, FL 32054

Title: T () Delete
Name: EDENFIELD, LISA
Address: 158 SW EDENFIELD WAY
City-St-Zip: LAKE CITY, FL 32024

Title: D () Delete
Name: WITT, J.P.
Address: 12656 US HIGHWAY 441
City-St-Zip: LAKE CITY, FL 32025

Title: D () Delete
Name: TANNER, CARL
Address: 4558 W. SR 238
City-St-Zip: LAKE BUTLER, FL 32054

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: D (X) Change () Addition
Name: CRAWFORD, DARRYL H
Address: 5096 NW 91 TRAIL
City-St-Zip: LAKE BUTLER, FL 32054

Title: D (X) Change () Addition
Name: BROWN, WILLIAM F
Address: 8515 SE CR 245
City-St-Zip: LAKE CITY, FL 32025

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: RANDALL EDENFIELD

RA

07/13/2009

Electronic Signature of Signing Officer or Director

Date