

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002472

FILED
Apr 23, 2009
Secretary of State

Entity Name: FIRST BAPTIST CHILDREN'S ACADEMY, INC.

Current Principal Place of Business:

1570 W MAIN STREET
WAUCHULA, FL 33873

New Principal Place of Business:

Current Mailing Address:

PO BOX 1718
WAUCHULA, FL 33873

New Mailing Address:

FEI Number: 01-0773533 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HUGHES, MISTY W
712 CROSBY LANE
WAUCHULA, FL 33873 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: HUGHES, MISTY W
Address: 712 CROSBY LANE
City-St-Zip: WAUCHULA, FL 33873

Title: D () Delete
Name: ATCHLEY, TERRY
Address: 1035 KNOLLWOOD CIRCLE
City-St-Zip: WAUCHULA, FL 33873

Title: D () Delete
Name: CONLEY, TERRI
Address: 2825 E. MAIN STREET
City-St-Zip: WAUCHULA, FL 33873

Title: D () Delete
Name: WALKER, KATHY
Address: 4162 W. MAIN STREET
City-St-Zip: WAUCHULA, FL 33873

Title: VPD () Delete
Name: CONERLY, DOTTIE
Address: PO BOX 413
City-St-Zip: WAUCHULA, FL 338730413

Title: T () Delete
Name: CHRISTIAN, JEREMY
Address: 101 SOUTH 3RD AVE
City-St-Zip: WAUCHULA, FL 33873

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: () Change () Addition
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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: MISTY HUGHES

Electronic Signature of Signing Officer or Director

OFFI

04/23/2009

Date