

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002685

FILED
Jan 08, 2009
Secretary of State

Entity Name: THE FIRST BAPTIST CHURCH OF LIVE OAK, INC.

Current Principal Place of Business:

401 WEST HOWARD STREET
LIVE OAK, FL 32064

New Principal Place of Business:

Current Mailing Address:

401 WEST HOWARD STREET
LIVE OAK, FL 32064

New Mailing Address:

FEI Number: 32-0134560

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLAIR, JERRY
9526 86TH STREET
LIVE OAK, FL 32060 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: FIFE, BILL
Address: 1407 DARBON STREET
City-St-Zip: LIVE OAK, FL 32064

Title: D () Delete
Name: YARICK, WILLIAM W
Address: 8940 127TH DRIVE
City-St-Zip: LIVE OAK, FL 32060

Title: D () Delete
Name: HILLHOUSE, EDDIE
Address: 7868 31ST ROAD
City-St-Zip: WELLBORN, FL 32094

Title: D (X) Delete
Name: FLETCHER, LYN
Address: 9044 141ST LN
City-St-Zip: LIVE OAK, FL 32060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WIGGINS, JOHN
Address: 1419 PEARL AVENUE
City-St-Zip: LIVE OAK, FL 32064

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

Title: D (X) Change () Addition
Name: FLETCHER, LYN
Address: 9044 141ST LN
City-St-Zip: LIVE OAK, FL 32060

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: JOHN WIGGINS

D

01/08/2009

Electronic Signature of Signing Officer or Director

Date