

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003008

FILED
Jan 27, 2009
Secretary of State

Entity Name: JOY BAPTIST CHURCH, INC.

Current Principal Place of Business:

550974 US HWY 1
HILLIARD, FL 32046

New Principal Place of Business:

Current Mailing Address:

550974 US HWY 1
HILLIARD, FL 32046

New Mailing Address:

FEI Number: 20-0895052

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DRURY, ROBERT M
550984 US HWY 1
HILLIARD, FL 32046 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: PRES () Delete
Name: DRURY, ROBERT M
Address: 550984 US HWY 1
City-St-Zip: HILLIARD, FL 32046

Title: V.P. () Delete
Name: MELVIN, CAMPBELL
Address: 55097 NASCAR DRIVE
City-St-Zip: CALLAHAN, FL 32011

Title: TRES () Delete
Name: MOSES, RYAN
Address: 76044 QUAIL RIDGE ROAD
City-St-Zip: YULEE, FL 32097

Title: SEC () Delete
Name: DRURY, VICKI D
Address: 550984 US HWY 1
City-St-Zip: HILLIARD, FL 32046

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DRURY, ROBERT M
Address: 550984 US HWY 1
City-St-Zip: HILLIARD, FL 32046

Title: VPD (X) Change () Addition
Name: MELVIN, CAMPBELL
Address: 55097 NASCAR DRIVE
City-St-Zip: CALLAHAN, FL 32011

Title: D (X) Change () Addition
Name: MOSES, RYAN
Address: 76044 QUAIL RIDGE ROAD
City-St-Zip: YULEE, FL 32097

Title: SD (X) Change () Addition
Name: DRURY, VICKI D
Address: 550984 US HWY 1
City-St-Zip: HILLIARD, FL 32046

Title: TD () Change (X) Addition
Name: MURPHY, RICHARD T
Address: 27830 CONNER NELSON AVE., P.O.BOX 307
City-St-Zip: HILLIARD, FL 32046

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: ROBERT M. DRURY

PD

01/27/2009

Electronic Signature of Signing Officer or Director

Date