

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010997

FILED
Jan 13, 2009
Secretary of State

Entity Name: FIRST BAPTIST CHURCH OF ESTO, INC.

Current Principal Place of Business:

1050 N HWY 79
BONIFAY, FL 32425

New Principal Place of Business:

Current Mailing Address:

P O BOX 5111
BONIFAY, FL 32425

New Mailing Address:

FEI Number: 74-3104965 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEGUE, RYAN
3442 SPRING VALLEY LANE
BONIFAY, FL 32425 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: TR () Delete
Name: CULBRETH, NEIL
Address: 701 SPRUCE RD
City-St-Zip: GRACEVILLE, FL 32440

Title: TR () Delete
Name: ELMORE, JEFF
Address: 1737 HWY 173
City-St-Zip: GRACEVILLE, FL 32440

Title: TR () Delete
Name: KIRKLAND, FRANCES
Address: P O BOX 5103
City-St-Zip: BONIFAY, FL 32425

Title: TR () Delete
Name: MCGOWAN, LOUISE
Address: P O BOX 5101
City-St-Zip: BONIFAY, FL 32425

Title: TR () Delete
Name: NEWMAN, JERRY
Address: 1358 GAVIN RD
City-St-Zip: BONIFAY, FL 32425

Title: TRT () Delete
Name: WATKINS, JOAN
Address: P O BOX 234
City-St-Zip: GRACEVILLE, FL 32440

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: JOAN WATKINS

TRT

01/13/2009

Electronic Signature of Signing Officer or Director

_____ Date