

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011898

FILED
Mar 03, 2009
Secretary of State

Entity Name: THE DAYSPRING MISSIONARY BAPTIST CHURCH OF GAINESVILLE, FLORIDA INCORPORATED

Current Principal Place of Business:

1945 NE 8TH AVENUE
GAINESVILLE, FL 32641

New Principal Place of Business:

Current Mailing Address:

1945 NE 8TH AVENUE
GAINESVILLE, FL 32641

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MCKENZIE, JOHN W
6706 NW 29TH STREET
GAINESVILLE, FL 32653 US

Name and Address of New Registered Agent:

HERRING, MARIE W
6706 NW 29TH STREET
GAINESVILLE, FL 32653 US

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: HERRING, MARIE W

03/03/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HERRING, W. MARIE
Address: 6408 S.E. 216TH TERRACE
City-St-Zip: HAWTHORNE, FL 32640

Title: D () Delete
Name: REAVES, JOSEPH
Address: 4312 SE 4TH AVE
City-St-Zip: GAINESVILLE, FL 32641

Title: D () Delete
Name: WILLIAMS, WILLIE
Address: 1621 SE 15TH AVE.
City-St-Zip: GAINESVILLE, FL 32641

Title: D () Delete
Name: LEE, MARK
Address: 1934 NE 3RD AVE.
City-St-Zip: GAINESVILLE, FL 32641

Title: D (X) Delete
Name: MEANS, GILBERT
Address: 921 N.E. 25TH TERRACE
City-St-Zip: GAINESVILLE, FL 32641

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: REAVES, JOE A
Address: 4312 SE 4TH AVE
City-St-Zip: GAINESVILLE, FL 32641

Title: D (X) Change () Addition
Name: WILLIAMS, WILLIE J
Address: 1621 SE 15TH AVE
City-St-Zip: GAINESVILLE, FL 32641

Title: D (X) Change () Addition
Name: LEE, MARK
Address: 1934 NE 3RD AVE
City-St-Zip: GAINESVILLE, FL 32641

Title: D (X) Change () Addition
Name: MEANS, GILBERT
Address: 921 NE 25TH TERRACE
City-St-Zip: GAINESVILLE, FL 32641

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: HERRING, MARIE

P

03/03/2009

Electronic Signature of Signing Officer or Director

Date