

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004179

FILED  
Apr 28, 2009  
Secretary of State

**Entity Name:** EASTERN AND GULF REGION BOARD OF APOSTLES, INC.

**Current Principal Place of Business:**

252 AVE. E  
PORT ST. JOE., FL 32456

**New Principal Place of Business:**

**Current Mailing Address:**

252 AVE. E  
PORT ST. JOE., FL 32456

**New Mailing Address:**

P. O. BOX 87  
PORT ST. JOE., FL 32457

**FEI Number:** 83-0439413

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

PITTMAN, NAPOLEON  
760 BORDERS RD.  
WEWAHITCHKA, FL 32465 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: DP ( ) Delete  
Name: PITTMAN, NAPOLEON  
Address: 252 AVE. E  
City-St-Zip: PORT ST. JOE., FL 32456

Title: DVPS ( ) Delete  
Name: RUDOLPH, DONALD JR.  
Address: 252 AVE. E  
City-St-Zip: PORT ST. JOE., FL 32456

Title: DVT ( ) Delete  
Name: MOSES, WILLIAM  
Address: 252 AVE. E  
City-St-Zip: PORT ST. JOE., FL 32456

**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:

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: NAPOLEON PITTMAN

DP

04/28/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date