

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006366

FILED  
May 01, 2009  
Secretary of State

Entity Name: NEW BIRTH BAPTIST CHURCH INC

## Current Principal Place of Business:

901 SOUTH DELANEY AVENUE  
AVON PARK, FL 33825

## New Principal Place of Business:

901 SOUTH DELANEY AVENUE  
AVON PARK, FL 338254125 US

## Current Mailing Address:

901 S DELANEY AVE  
AVON PARK, FL 338254125

## New Mailing Address:

901 SOUTH DELANEY AVENUE  
AVON PARK, FL 338254125 US

FEI Number: 16-1729609      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

ABLES, CLIFFORD M III  
551 SOUTH COMMERCE AVENUE  
SEBRING, FL 33870 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: DAVIS, PATRICIA  
Address: 105 STEPHANIE LANE  
City-St-Zip: SEBRING, FL 33870 US

Title: D ( ) Delete  
Name: DOWNS, WILLIE E  
Address: 2414 HOPE CIRCLE  
City-St-Zip: SEBRING, FL 33870 US

Title: D ( ) Delete  
Name: MARITY, JOSEPHINE  
Address: 2885 WHISTLE STOP  
City-St-Zip: SEBRING, FL 338726203 US

Title: D ( ) Delete  
Name: BURNETT, MAMIE  
Address: 5722 GRANADA BLVD  
City-St-Zip: SEBRING, FL 33872 US

Title: D ( ) Delete  
Name: POINTER, IRENE  
Address: 4428 MERCADA DRIVE  
City-St-Zip: SEBRING, FL 33872 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: HARGROVE, ALTHEA  
Address: 2885 WHISPER STOP  
City-St-Zip: SEBRING, FL 33870 US

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  
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: JOSEPHINE MARITY

D

05/01/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date