

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011474

FILED
Apr 07, 2009
Secretary of State

Entity Name: FIRST BAPTIST CHURCH OF MANGO, INC

Current Principal Place of Business:

11619 DR. MARTIN LUTHER KING BLVD E.
SEFFNER, FL 33584

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 206
MANGO, FL 335500206

New Mailing Address:

FEI Number: 59-6033964

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DICKERSON, VESTA A
833 BAYOU VIEW DR
BRANDON, FL 335102092 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: P () Delete
Name: DICKERSON, BILLY J REV
Address: 833 BAYOU VIEW DR
City-St-Zip: BRANDON, FL 33510

Title: S () Delete
Name: DICKERSON, VESTA A
Address: 833 BAYOU VIEW DR
City-St-Zip: BRANDON, FL 33510

Title: T () Delete
Name: CARTER, SHARON A
Address: 12005 PARK AVE
City-St-Zip: SEFFNER, FL 33584

Title: T () Delete
Name: HUNTER, JUANITA
Address: P.O. BOX 1004
City-St-Zip: SEFFNER, FL 33583

Title: T () Delete
Name: FREEMAN, JACKIE
Address: 11206 HOBART CT
City-St-Zip: SEFFNER, FL 33584

Title: C () Delete
Name: ALLRED, NITA V
Address: 5511 KENNEDY HILLS DR
City-St-Zip: SEFFNER, FL 33584

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: T (X) Change () Addition
Name: HUNTER, JUANITA
Address: 509 W. TENNESSEE AVE.
City-St-Zip: SEFFNER, FL 33584

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: VESTA A. DICKERSON

S

04/07/2009

Electronic Signature of Signing Officer or Director

Date