2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008546

FILED May 28, 2009 Secretary of State

Entity Name: GOODHOPE BAPTIST CHURCH, INC. **Current Principal Place of Business: New Principal Place of Business:** 1895 OWEN COTTON ROAD **BAKER, FL 32531 Current Mailing Address: New Mailing Address:** 1895 OWEN COTTON ROAD **BAKER, FL 32531** FEI Number: 59-3505962 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: Name and Address of New Registered Agent: THAMES, MARION E GLICK, J. DAVID 8244 JORDAN RD 8351 THAMES ROAD BAKER, FL 32531 US BAKER, FL 32531 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: J. DAVID GLICK 05/28/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete TURNER, JIM Name: Name: Address: 7938 RED BARROW ROAD Address: City-St-Zip: BAKER, FL 32531 City-St-Zip: Title: () Delete Title: () Change () Addition Name: STEELE, RODDY Name: Address: 7521 RED BARROW RD. Address: City-St-Zip: **BAKER, FL 32531** City-St-Zip: Title: () Delete Title: () Change () Addition CROWSON, HAROLD Name: Name: 1956 L G RUSSELL ROAD Address: Address: City-St-Zip: BAKER, FL 32531 City-St-Zip: Title: () Delete Title: () Change (X) Addition Name: Name: GLICK, SUSAN K 8244 JORDAN RD Address: Address: City-St-Zip: City-St-Zip: **BAKER, FL 32531**

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: J. DAVID GLICK D 05/28/2009