

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06373

FILED
Apr 21, 2009
Secretary of State

Entity Name: BLACKWELDER MEMORIAL FREE WILL BAPTIST CHURCH, INC.

Current Principal Place of Business:

4222 SW CR 121
LAKE BUTLER, FL 32054 US

New Principal Place of Business:

Current Mailing Address:

8441 SW CR 239A
LAKE BUTLER, FL 32054 US

New Mailing Address:

FEI Number: 59-2454907

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRAWFORD, NORA S
8441 SW CR 239 A
LAKE BUTLER, FL 32054 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: T () Delete
Name: CRAWFORD, NORA S
Address: 8441 SW CR 239A
City-St-Zip: LAKE BUTLER, FL 32054

Title: D () Delete
Name: CRAWFORD, CHARLES A.
Address: 8441 SW CR 239A
City-St-Zip: LAKE BUTLER, FL 32054

Title: S () Delete
Name: MULLIN, SHARON
Address: 26227 NW CR 239
City-St-Zip: ALACHUA, FL 32615

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: NORA S. CRAWFORD

T

04/21/2009

Electronic Signature of Signing Officer or Director

Date