2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007826

FILED Sep 01, 2009 Secretary of State

Entity Name: CHRIST THE SOLID ROCK BAPTIST CHURCH OF TALLAHASSEE, INC.

| Oursent Britania I Black of Business | | New Principal Place of Business | |
|--|--|--|-------------------------|
| Current Principal Place of Business: New Principal Place of Business: | | | |
| 6504 NORTH MERIDIAN ROAD TALLAHASSEE, FL 32303 | | | |
| Current Mailing Address: | | New Mailing Address: | |
| | TH MERIDIAN ROAD SSEE, FL 32303 | | |
| FEI Number: 26-0715341 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: | | | |
| | | | |
| FOUTZ, WILLIAM F 6504 NORTH MERIDIAN ROAD TALLAHASSEE, FL 32303 US | | | |
| 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: | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | D () Delete FOUTZ, WILLIAM F 6504 NORTH MERIDIAN ROAD TALLAHASSEE, FL 32303 | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: City-St-Zip: | VD () Delete HARRIS, WILLIE REV. 2009 WARWICK STREET TALLAHASSEE, FL 32310 | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: City-St-Zip: | S () Delete BAKER, CHERYL 1101 BENNETT STREET TALLAHASSEE, FL 32304 | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: City-St-Zip: | T () Delete SETTLES, YOLANDA 405 MERCURY DRIVE TALLAHASSEE, FL 32305 | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: City-St-Zip: | AT () Delete MARTIN, JEANETTE 1007 MOSLEY STREET TALLAHASSEE, FL 32310 | Title: Name: Address: City-St-Zip: | () Change () Addition |
| | | | |

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: YOLANDA SETTLES T 09/01/2009