2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011113

City-St-Zip:

FILED Apr 28, 2009 Secretary of State

Entity Na	me: CYPRESS BAPTIST CHURCH, INC.				
Current Principal Place of Business:		New Prince	New Principal Place of Business:		
6296 CEMETERY AVE CYPRESS, FL 32432			6296 CEMETARY AVE CYPRESS, FL 32432		
Current Mailing Address:		New Maili	New Mailing Address:		
PO BOX 7 CYPRESS	0 S, FL 32432				
FEI Number	: FEI Number Applied For ()	FEI Number Not App	icable (X) Certificate of Status Des	sired ()	
Name and	Address of Current Registered Agent:	Name and	Address of New Registered Agen	t:	
4450 LAFA	ANT, FRANK E AYETTE STREET A, FL 32446 US				
	e named entity submits this statement for the e of Florida.	ne purpose of changing i	ts registered office or registered age	nt, or both,	
SIGNATU	RE:				
	Electronic Signature of Registered	Agent	Date		
OFFICER	S AND DIRECTORS:	ADDITION	IS/CHANGES TO OFFICERS AND I	DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () Delete MCDANIEL, WILLIAM R PO BOX 3 CYPRESS, FL 32432	Title: Name: Address: City-St-Zip:	D (X) Change () Addition CARROLL, RICHARD E 3044 CAMP ROAD MARIANNA, FL 32446		
Title: Name: Address: City-St-Zip:	D () Delete CARROLL, EARL 3044 CAMP ROAD MARIANNA, FL 32446	Title: Name: Address: City-St-Zip:	D (X) Change () Addition TRUETT, JOANNE 4206 THOMPSON ROAD MARIANNA, FL 32448		
Title: Name: Address: City-St-Zip:	D () Delete VILLARREAL, NARCISCO 2315 HOLLISTER RD MARIANNA, FL 32446	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address:	() Delete	Title: Name: Address:	D () Change (X) Addition MCCROAN, JACKIE 6219 CEMETARY AVE		

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.

City-St-Zip: GRAND RIDGE, FL 32442

SIGNATURE: RICHARD E. CARROLL Ρ 04/28/2009