## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N08000001052

FILED May 06, 2009 Secretary of State

Entity Name: PINE BAPTIST CHURCH OF GARDEN CITY, INC. **Current Principal Place of Business: New Principal Place of Business:** 11764 LEM TURNER ROAD JACKSONVILLE, FL 32218 US **Current Mailing Address: New Mailing Address:** 17345 EAGLE BEND BLVD JACKSONVILLE, FL 32226 FFI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired (X) 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: TYSON, YVETTE C TISON, YVETTE C 17345 ÉAGLE BEND BLVD 17345 ÉAGLE BEND BLVD JACKSONVILLE, FL 32226 US JACKSONVILLE, FL 32226 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: YVETTE C. TISON 05/06/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition TYSON, CARL P TISON, CARL P Name: Name: 3040 STARATT RD Address: 3040 STARATT RD Address: City-St-Zip: JACKSONVILLE, FL 32226 US City-St-Zip: JACKSONVILLE, FL 32226 US Title: Title: (X) Change ( ) Addition () Delete Name: BASS, CHRIS Name: POOLE, WILL Address: 2123 ED JOHNSON DR. Address: 3518 JONES RD City-St-Zip: JACKSONVILLE, FL 32226 US City-St-Zip: JACKSONVILLE, FL 32218 US Title: () Delete Title: () Change () Addition LIDDELL, GRAYSON Name: Name: 11813 LEM TURNER ROAD Address: Address: City-St-Zip: JACKSONVILLE, FL 32218 US City-St-Zip: Title: STD ( ) Delete Title: () Change () Addition Name: TISON, YVETTE X Name: 17345 EAGLE BEND BLVD Address: Address: City-St-Zip: JACKSONVILLE, FL 32226 US City-St-Zip: Title: () Delete Title: () Change () Addition WESLEY, DARREN C Name: Name: 640 BIRD RD Address: Address: JACKSONVILLE, FL 32226 US City-St-Zip: 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: DARREN C. WESLEY PAST 05/06/2009