

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003050

FILED  
Jan 06, 2009  
Secretary of State

**Entity Name:** JETHRO FIRST BAPTIST CHURCH OF CRESCENT CITY, INC.

**Current Principal Place of Business:**

515 FLORIDA AVE  
CRESCENT CITY, FL 32112

**New Principal Place of Business:**

101 CEDAR DRIVE  
CRESCENT CITY, FL 32112

**Current Mailing Address:**

515 FLORIDA AVE  
CRESCENT CITY, FL 32112

**New Mailing Address:**

P. O. BOX 52  
CRESCENT CITY, FL 32112

**FEI Number:** 35-2332884

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GILLINS, RONALD W  
1025 HWY 308 B  
WELAKA, FL 32193 US

**Name and Address of New Registered Agent:**

GILLINS, RONALD W DEACON  
1025 ELM ST- HWY 308 B  
WELAKA, FL 32193 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: DEACON. RONNIE W GILLINS

01/06/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: T ( ) Delete  
Name: WALKER, AGNES  
Address: 108 GAUTIER ROAD  
City-St-Zip: CRESCENT CITY, FL 32112

Title: T ( ) Delete  
Name: JACKSON, MILDRED  
Address: 41 WESTGATE LANE  
City-St-Zip: PALM COAST, FL 32164

Title: T ( ) Delete  
Name: JONES, W E  
Address: 385 MIAN STREET  
City-St-Zip: CRESCENT CITY, FL 32112

**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: DEACON. RONNIE W GILLINS

DEA

01/06/2009

Electronic Signature of Signing Officer or Director

Date